STATE OF CALIFORNIA OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT

Patient Discharge Data File Documentation January-December 2002

PUBLIC VERSION

COMMA-DELIMITED TEXT FORMAT

CD-ROM

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INTRODUCTION

Patient Discharge Data: Public Patient-Level Dataset

The California Office of Statewide Health Planning and Development (OSHPD) provide a public dataset of the Patient Discharge Database available for purchase on compact disc (CD). The data is made available by OSHPD once it has been screened by the automated reporting software and corrected by the individual hospitals. The public patient-level dataset includes patient zip code, demographic variables and clinical information

The public dataset is comprised of a record for each inpatient discharged from a licensed acute care hospital. This includes: General Acute Care Hospitals, Acute Psychiatric Hospitals, Chemical Dependency Recovery Hospitals, and Psychiatric Health Facilities. (Note: the only exceptions are records not reported by some California State Hospitals; see the State Hospitals discussion on page four.)

The patient discharge dataset is available for discharges in each calendar year. The data on CD-ROM are stored on one CD containing three zipped data files and a full set of documentation files. The discharge records are divided into three sets by the geography of the reporting hospitals. One file contains discharge records from hospitals in Los Angeles County, another file contains discharges from the seven other counties in Southern California and the third file contains discharges from hospitals in the remaining 50 Northern California Counties.

Masked variables

To protect patient confidentiality, those records with unique combinations of a select set of demographic variables will have one or more of those variables masked to make sure the files are de-identified. Each unique record will have the minimum number of fields masked to ensure the data is longer unique. The variable masking will occur in the following order:

ORDER OF MASKING	DATA FIELDS SUBJECT TO MASKING
2 nd 3 rd R 3 rd S 4 th S 5 th A 6 th A 7 th S 8 th A 9 th P 10 th C	Age in years (at admission) Ethnicity Race Sex Age Category 20 (20 Age Categories) Age Category 5 (5 Age Categories) Small County Groups* Admit Quarter Patient Zip Code ** OSHPD ID *Small counties with total populations of 30,000 or less are grouped into 3 categories: Central (CE), Northeastern (NE), and Northwestern (NW). Ten counties were grouped in 2002: Central: Alpine, Inyo, Mariposa, Mono; Northeastern: Modoc, Plumas, Sierra; Northwestern: Colusa, Glenn, and Trinity. **Five-digit zip will be masked to three-digits; if record is still unique, zip will be totally masked with an asterisk.

General assistance is available by calling OSHPD's Healthcare Information Resource Center at (916) 322-2814.

Public Discharge Dataset

Data Fields in 2002 Public Discharge Dataset	Percent Remaining Unmasked For Variables Subject to Masking
Hospital Identification Number	100.0%
Type (level) of Care	
Age in Years	52.5%
Age (20 Categories)	86.3%
Age (5 Categories)	93.0%
Sex	81.2%
Ethnicity	69.3%
Race	73.3%
Zip Code (5 digits masked to 3 digits)	98.3%
Zip Code (3 digits masked to 0 digits)	99.6%
County of Patient's Residence (or Small County Groups)	100.0%
Length of Stay	
Quarter Admitted	96.4%
Year Admitted	
Source of Admission	
Type of Admission	
Disposition of Patient	
Pre-hospital Care and Resuscitation (Do Not Resuscitate Order)	
Expected Principal Source of Payment - Payer Category	
Expected Principal Source of Payment - Type of Coverage	
Expected Principal Source of Payment - Plan Code Number	
Total Charges	
Principal External Cause of Injury (E-Code)	
Other External Cause of Injuries (up to 4 Other E-Codes)	
Major Diagnostic Category	
Diagnosis Related Group	
Principal Diagnosis	
Condition Present at Admission (for Principal Diagnosis)	
Principal Procedure	
Days from Admission to Principal Procedure	
Other Diagnoses (24 Other Diagnoses)	
Condition Present at Admission (for Other Diagnoses)	
Other Procedures (20 Other Procedures)	
Days From Admission to Other Procedures	

IMPORTING NOTES:

The fields listed below contain numeric codes, which are not numeric values; most PC software will treat these fields as numeric values unless formatted otherwise. Thus, when importing the data into your software, these fields should be formatted as text or alphanumeric to retain the leading and trailing zeros. Also, when a text variable is masked, the field value is an asterisk, which may cause errors if imported as numeric.

- OSHPD-Hospital Identification Number
- 5 Age Category and 20 Age Category Fields
- Sex
- Ethnicity
- Race
- Patient Zip Code
- County of Patient's Residence
- Admission Quarter
- Expected Principal Source of Payment Plan Code Number
- MDC
- DRG
- All diagnosis code fields (principal and other)
- All procedure code fields (principal and other)

It is especially important that all Diagnosis and Procedure code fields be formatted as "text." These fields are comprised of ICD-9-CM codes, some of which begin with alpha characters that cannot be read if not formatted as text. Also, many ICD-9-CM codes have leading and/or trailing zeros. For example, the ICD-9-CM code for *Salmonella Gastroenteritis* is "003.0". If it is not formatted as text, it will appear as "3", which is the numeric value, but is not the valid diagnostic code for *Salmonella Gastroenteritis*.

It is not absolutely essential but is recommended, to maintain leading zeros in the other codes that contain leading zeros (Hospital Identification Number, Patient's County of Residence, MDC, DRG, and Payer Plan Code Number). When these fields are formatted as "text," the number of digits in each respective field will then remain constant. For example, Alameda County will then appear as "01", rather than "1", and will contain two digits like the other 2-digit county codes (Fresno through Yuba, 10 through 58, respectively).

COMMA DELIMITED DATA FORMAT

In the comma-delimited set, the length of each field and the length of each record will vary according to the data reported. To assist you in using the comma delimited patient discharge data sets, a header row identifying each data element is provided in the position of the first record.

Each data element is separated by a comma and is defined and described in this documentation. In Appendix I, there is a table listing the Field Label (used in the header row), Field Name, Field Type (format), and Maximum Number of Characters.

Fields with no data will have consecutive delimiters (commas). Most PC software will have no difficulty with consecutive delimiters. However, some software packages may handle consecutive delimiters as a single delimiter and adjustments will need to be made.

Note: It is possible for some invalid values to remain in the database "as reported" by the hospital, due to a lack of database enforced integrity. This means that for some observations, you may find blank values, invalid alpha characters in numeric fields, out-of-range numeric values, etc.

FACILITY EXCEPTIONS

State Hospitals:

Through the first half of 1989, the database included twelve state hospitals. As of July 1989, the eleven operated by the Department of Mental Health or the Department of Developmental Services, serving mentally disordered and developmentally disabled patients, no longer report discharge data. The twelfth, the Veterans Home of California, Nelson M. Holderman Memorial Hospital, in Yountville has continued to report discharge data. Records from this hospital can be located using the Hospital Identification Number "281297."

Psychiatric Health Facilities:

Psychiatric Health Facilities, which provide care in licensed Acute Psychiatric beds, are subject to the same reporting requirements as other California hospitals. This type of hospital was first licensed in California in 1988. Patient discharge data for 1989 and for January through June 1990 included data from six Psychiatric Health Facilities; data for July through December 1990 include data from all but one of the 16 licensed Psychiatric Health Facilities. All of these facilities started reporting their patient discharge data beginning in1991.

Modifications and Non-Compliant Facilities:

Some hospitals have applied for and been granted "modifications" to standard Patient Discharge Data reporting requirements. Other hospitals were unable to complete specific fields as required and were deemed "non-compliant" at the time of reporting. See Appendix D (Data Exceptions) for a listing of all non-compliant hospitals and those with approved modifications and their affected variables.

Defaulted Variables

Invalid or missing values (submitted below the error tolerance level) are defaulted to "unknown." The table below displays default numbers and percentages.

Default	Numbers of	Percent of
Status	Records	Records
Not Defaulted	3,905,541	99.72%
One Variable Defaulted	10,365	.26%
Multiple Variables Defaulted	457	.01%

VARIABLE CHANGES

Hospital Identification Number:

The first six characters of each record contain the "Hospital Identification Number". Beginning with data reported for 1995, this former nine-digit hospital identification number was restructured to six digits. The former first digit, that indicated the type of care reported, has been made a separate data element (Type of Care) and is described below. The former filler number "06" (2nd and 3rd digits) has been dropped. Thus, the hospital identification number now consists of the following six digits: the first two indicate the county and the last four are unique to a facility within each county.

Type of Care:

The second field on each record is a single digit field that describes the "Type of Care" ("Level of Care" in 1995 and 1996) from which the patient was discharged. The Type of Care codes and labels are:

- 1 = Acute Care
- 3 = Skilled Nursing and Intermediate Care (frequently known as Long Term Care)
- 4 = Psychiatric Care
- 5 = Chemical Dependency Recovery Care
- 6 = Physical Rehabilitation Care

Note: there has never been a Type of Care or Level of Care code "2".

Beginning with 1997 data, hospitals were required to report one of the **five** Types of Care, above, for each discharge.

For the 1995 and 1996 data years, hospitals were required to assign, to each discharge, one of **three** Levels of Care ("3" for Long Term Care, "6" for Rehabilitation Care and "1" for all other types of care).

Prior to 1995, discharges were optionally reported in sets, by one of the five Types of Care. Most hospitals chose to include all discharges, regardless of the type of care, in one set (usually acute care).

HISTORICAL SUMMARY OF FORMAT AND CONTENT CHANGES PATIENT DISCHARGE DATA COLLECTION PROGRAM		
DATA ITEM:	ACTION / EFFECTIVE DATE:	
E-Code	Added - July 1990	
Social Security Number	Added - July 1990	
Record Linkage Number (Encrypted SSN)	Added - July 1990	
Zip Code for Homeless (ZZZZZ)	Added - November 1993	
Hospital Identification Number (from 9 to 6 digits)	Changed - January 1995	
Level of Care (see Type of Care, below)	Added - January 1995	
Ethnicity/Race	Changed - January 1995	
Source of Admission	Expanded - January 1995	
Type of Admission	Changed - January 1995	
Procedure Dates (for all reported procedures)	Added - January 1995	
Patient Disposition	Expanded - January 1995	
Expected Source of Payment:	Changed - January 1995	
Zapostos ocuros or raymont	Expanded - January 1999	
Principal Diagnosis-Condition Present at Admission	Added - January 1996	
Other Diagnoses-Condition Present at Admission	Added - January 1996	
Type of Care (formerly Level of Care)	Changed - January 1997	
Pre-hospital Care & Resuscitation (Do Not Resuscitate Order)	Added - January 1999	

HOSPITAL IDENTIFICATION NUMBER

FIELD NAME : OSHPD_ID

DEFINITION : A unique six-digit identifier assigned to each facility by the Office of Statewide

Health Planning and Development. The first two digits indicate the county in which the hospital is located. The last four digits are unique within each

county.

CODES, CATEGORIES AND COMMENTS:

A - 99 = 01-58 = County Codes (see Appendix A)

B - <u>9999</u> = Unique Hospital Identifier (within county)

OSHPD Facility ID Number will be the 9th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

TYPE OF CARE

FIELD NAME : TYP_CARE

DEFINITION : Defined by the California Health and Safety Code, this refers to the licensure of the

bed occupied by an inpatient. The types of care are documented on the official license issued by Licensing and Certification of the California State Department of

Health Services.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u> <u>Category</u> <u>Licensed Bed Classification/Designation</u>

1 = Acute Care General Acute Care

3 = Skilled Nursing/Intermediate Care Skilled Nursing/Intermediate Care (a.k.a. Long Term

Care)

4 = Psychiatric Care Acute Psychiatric Care

5 = Chemical Dependency Recovery Care Chemical Dependency Recovery Hospital/Service

6 = Physical Rehabilitation Care Rehabilitation Center, a bed designation within the

General Acute Care classification.

All other values for Type of Care are not considered valid.

AGE IN YEARS (at Admission)

FIELD NAMES : AGE_YRS

DEFINITION : Age of patient at time of admission.

CODES, CATEGORIES AND COMMENTS:

Age = Blank indicates age has been masked or is unknown (the year of birth is incomplete or unknown and an age of 0 has been assigned).

Newborns are identified with a code 7 in Source of Admission or infants (less than 24 hours old) are coded with a 3 in Type of Admission.

To reduce the need for masking to protect patient confidentiality; all patients older than 85 will be coded as "85" years of age. This can be considered "85 and older."

If necessary, Age in Years will be the first variable masked to de-identify unique patient records, by blanking-out reported age. This is the only numeric data element that will be masked; all other variables subject to masking are text variables and contain an asterisk when masked.

AGE 20 CATEGORY

FIELD NAME : AGECAT20

DEFINITION : Age range categories based on the patient's age at the time of admission.

Twenty age categories; mostly 5-year increments.

CODES, CATEGORIES AND COMMENTS:

The following age breakdown was provided in public version B for 1999 and 2000.

CATEGORY	AGE	DEFINITION
01	under 1 year	under 1 year
02	1-4 years	366 days through 4 years
03	5-9 years	5 years through 9 years
04	10-14 years	10 years through 14 years
05	15-19 years	15 years through 19 years
06	20-24 years	20 years through 24 years
07	25-29 years	25 years through 29 years
08	30-34 years	30 years through 34 years
09	35-39 years	35 years through 39 years
10	40-44 years	40 years through 44 years
11	45-49 years	45 years through 49 years
12	50-54 years	50 years through 54 years
13	55-59 years	55 years through 59 years
14	60-64 years	60 years through 64 years
15	65-69 years	65 years through 69 years
16	70-74 years	70 years through 74 years
17	75-79 years	75 years through 79 years
18	80-84 years	80 years through 84 years
19	85 years & over	85 years or greater
00	unknown (0)	Year of birth incomplete or unknown

Age Category (20) will be the 5th variable masked if necessary to de-identify unique patient records by replacing age category code with an asterisk.

AGE 5 CATEGORY

FIELD NAME : AGECAT5

DEFINITION : Five age categories; Random year increments.

CODES, CATEGORIES AND COMMENTS:

CATEGORY	AGE	DEFINITION
01	Under 1 year	Under 1 year
02	1-17 years	1 year through 17 years
03	18-34 years	18 years through 34 years
04	35-64 years	35years through 64 years
05	65years & over	65 years or greater
00	Unknown (0)	Year of birth incomplete or unknown

Age Category (5) will be the 6th variable masked if necessary to de-identify unique patient records by replacing age category code with an asterisk.

SEX

FIELD NAME : SEX

DEFINITION : This is the gender of the patient.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
1	Male
2	Female
3	Other
4	Unknown

All other values for Sex are not considered valid.

"Other" includes sex changes, undetermined sex, and live births with congenital abnormalities that obscure sex identification. "Unknown" indicates that the patient's sex was not available from the medical record.

Sex (gender of the patient) will be the 4th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

ETHNICITY

FIELD NAME : ETHNCTY

DEFINITION : This code indicates whether or not the patient's ethnicity is Hispanic.

CODES, CATEGORIES AND COMMENTS:

The single code digit indicates ethnicity and includes:

<u>Code</u>	<u>Category</u>
1	Hispanic
2	Non-Hispanic
3	Unknown

All other values for Ethnicity are not considered valid.

Both ethnicity and race are self-reported by the patient.

Ethnicity will be the 2nd variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

RACE

FIELD NAME : RACE

DEFINITION : This code indicates the patient's racial background.

CODES, CATEGORIES AND COMMENTS:

Code 1	<u>Category</u> White – A person having origins in or who identifies with any of the original Caucasian peoples of Europe, North Africa, or the Middle East.
2	Black – A person having origins in or who identifies with any of the black racial groups of Africa.
3	Native American/Eskimo/Aleut – A person having origins in or who identifies with any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
4	Asian/Pacific Islander – A person having origins in or who identifies with any of the original oriental peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. Includes Hawaii, Laos, Vietnam, Cambodia, Hong Kong, Taiwan, China, India, Japan, Korea, the Philippine Islands, and Samoa.
5	Other – Any possible options not covered in the above categories.
6	Unknown

All other values for Race are not considered valid.

Both ethnicity and race are self-reported by the patient.

Race will be the 3rd variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

PATIENT ZIP CODE FIVE DIGIT / THREE DIGIT

FIELD NAME : PATZIP

DEFINITION : The ZIP Code of the patient's residence (all five digits). This is a unique code

assigned to a specific geographic area by the U.S. Postal Service for the

patient's usual residence.

CODES, CATEGORIES AND COMMENTS:

The five digits of the ZIP Code of the patient's residence.

If the field is coded with XXXXX, the ZIP Code is unknown.

If it is coded with YYYYY, the patient is from an area outside the United States.

If it is coded with ZZZZZ, the patient has no residence (homeless).

If the first three digits are the only digits reported then it is a partial ZIP Code. It will be shown as a 5-digit ZIP code—the first three digits plus '00'. Example: Sacramento, CA 95800. There are no partial ZIP codes in the 2001 or 2002 data.

The reported ZIP Code will be the 8th variable masked if necessary to de-identify unique patient records to protect patient confidentiality. The Patient ZIP Code can be masked sequentially from 5-digits to 3-digits, then from 3-digits to just an asterisk, if required to de-identify the record.

COUNTY OF PATIENT'S RESIDENCE

FIELD NAME : PATCNTY

DEFINITION : The patient's zip code is used to assign a county of residence.

CODES, CATEGORIES AND COMMENTS:

Codes: 00-58, CE, NE and NW

01-58 indicates a county in California (see list in Appendix A); 00 indicates that the patient's zip code was unknown, outside California, outside the U.S., or homeless; blanks indicate the patients ZIP Code was unreported or partial. Data for 2001 and 2002 are the only data in which some records have a blank patient county.

If the first three digits of the patient's ZIP code are the only digits reported then it is a partial ZIP Code. There are no partial ZIP codes in the 2001 or 2002 data.

To protect patient confidentiality, those counties with populations less than 30,000 are assigned to one of three groups of small counties to de-identify unique patient records. The groups and counties included are:

GROUP	COUNTIES
CE (Central)	Alpine, Inyo, Mariposa and Mono
NE (North East)	Modoc, Plumas and Sierra
NW (North West)	Colusa, Glenn and Trinity

Note – Using the reported ZIP Code, OSHPD assigns the patient's county of residence. ZIP Codes are designed for mail delivery, not to identify political boundaries. Therefore, some ZIP Codes cross county boundaries. For such ZIP Codes, OSHPD assigns the county with the greatest population in the respective ZIP Code.

LENGTH OF STAY (Days)

FIELD NAME : LOS

DEFINITION : Total number of days from admission date to discharge date of each patient.

CODES, CATEGORIES AND COMMENTS:

The days are calculated by subtracting the Admission Date from the Discharge Date. The length of stay for patients admitted on day one and discharged on day two is counted as one day.

Patients admitted and discharged on the same day yield a calculated length of stay of "0" days. This requires changing those (same-day admits and discharges) zeros to "ones" before performing average length of stay calculations to achieve more meaningful average length of stay calculations.

The number of days is right justified and zero filled (for fixed-length data format).

ADMISSION: QUARTER

FIELD NAME : ADM_QTR

DEFINITION : Quarter the patient was admitted to the hospital.

CODES, CATEGORIES AND COMMENTS:

Code Quarter

Quarter : One-digit quarter 1 January-March

2 April-June

3 July-September

4 October-December

Quarter admitted will be the 7th variable masked if necessary to de-identify unique patient records by replacing code with an asterisk.

ADMISSION: YEAR

FIELD NAMES : ADM_YR

DEFINITION : Year the patient was admitted to the hospital.

CODES, CATEGORIES AND COMMENTS:

Four-digit Year - This is comprised of first two digits century and last two digits year.

SOURCE OF ADMISSION

FIELD NAME : ADM_SRC

DEFINITION : Effective with discharges on January 1, 1995, the source of admission

describes three aspects of the source:

The <u>first digit</u> describes the <u>site</u> from which the patient originated.

The second digit describes the license of site from which the patient

originated.

The <u>third digit</u> describes the <u>route</u> by which the patient was admitted.

CODES, CATEGORIES AND COMMENTS:

Site:

<u>Code</u>	<u>Category</u>
1	Home
2	Residential Care Facility
3	Ambulatory Surgery
4	Skilled Nursing/Intermediate Care
5	Acute Inpatient Hospital Care
6	Other Inpatient Hospital Care
7	Newborn*
8	Prison/Jail
9	Other

All other values for "Site" are not considered valid.

Licensure of Site:

<u>Category</u>
This Hospital
Another Hospita
Not a Hospital

All other values for "Licensure of Site" are not considered valid.

Route:

<u>Code</u>	<u>Category</u>			
1	Your ER			
2	Not Your ER (or no ER)			
All other values for "Route" are not considered valid.				

^{*&}quot;Newborn" source of admission is defined as a "baby born alive in this hospital."

TYPE OF ADMISSION

FIELD NAME : ADM_TYPE

DEFINITION : Effective with discharges on January 1, 1995, the patient's type of admission

was reported using one of the categories listed below. The critical distinction

is not how but when the admission was arranged.

CODES, CATEGORIES AND COMMENTS:

<u>Code</u>	<u>Category</u>
1	Scheduled (Scheduled in advance, at least of 24 hours or more prior to admission)
2	Unscheduled (Not scheduled within 24 hours or more prior to admission)
3	Infant, less than 24 hrs old
4	Unknown (Does not include stillbirths)

All other values for Type of Admission are not considered valid.

DISPOSITION OF PATIENT

FIELD NAME : DISP

DEFINITION : The consequent arrangement or event ending a patient's stay in the reporting

facility. Effective with discharges beginning January 1, 1995, the codes are as

follows:

CODES, CATEGORIES AND COMMENTS:

Disposition of Patient:

Code Category
01 Routine (Home)

Within this Hospital:

<u>Code</u>	<u>Category</u>
02	Acute Care
03	Other Care

04 Skilled Nursing/Intermediate Care

To Another Hospital:

TO Another Hospital.			
Code	Category		
05	Acute Care		
06	Other Care (not Skilled Nursing/Intermediate Care)		
07	Skilled Nursing/Intermediate Care		
08	Residential Care Facility		
09	Prison/Jail		
10	Against Medical Advice		
11	Died		
12	Home Health Service		
13	Other		

All other values for Disposition are not considered valid.

PREHOSPITAL CARE AND RESUSCITATION

FIELD NAME : DNR

DEFINITION : This code indicates whether or not there was a "Do Not Resuscitate" order

upon admission or within 24 hours of admission from a physician.

CODES, CATEGORIES AND COMMENTS:

A "Do Not Resuscitate" (DNR) order is a directive from a physician in a patient's current inpatient medical record instructing that the patient is not to be resuscitated in the event of a cardiac or pulmonary arrest. In the event of a cardiac or pulmonary arrest, resuscitative measures include, but are not limited to, the following: cardiopulmonary resuscitation (CPR), intubation, defibrillation, cardioactive drugs, or assisted ventilation.

Code Category

Y = Yes - a DNR order was written at the time of or within the first 24 hours of patient's admission to the hospital.

N = No - a DNR order was not written at the time of or within the first 24 hours of the patient's admission to the hospital.

All other values for Prehospital Care and Resuscitation are not considered valid.

EXPECTED SOURCE OF PAYMENT PAYER CATEGORY

FIELD NAME : PAY_CAT

DEFINITION : This code indicates the category of payer (type of entity or organization) who

is expected to pay or did pay the greatest share of the patient's bill.

CODES, CATEGORIES AND COMMENTS:

Expected Payer Categories						
Code	Category	Code	Category			
01	Medicare	06	Other Government			
02	Medi-Cal	07	Other Indigent			
03	Private Coverage	08	Self Pay			
04	Workers' Compensation	09	Other Payer			
05	County Indigent Programs	00	Not reported or reported in error			

All other values for Payer Category are not considered valid.

- <u>Medicare</u> A federally administered third party reimbursement program authorized by Title XVIII of the Social Security Act. Includes crossovers to secondary payers.
- <u>Medi-Cal</u> A state administered third party reimbursement program authorized by Title XIX of the Social Security Act.
- <u>Private Coverage</u> Payment covered by private, non-profit, or commercial health plans, whether insurance
 or other coverage, or organizations. Included are payments by local or organized charities, such as the
 Cerebral Palsy Foundation, Easter Seals, March of Dimes, or Shriners.
- <u>Workers' Compensation</u> Payment from workers' compensation insurance, government or privately sponsored.
- <u>County Indigent Programs</u> Patients covered under Welfare and Institutions Code Section 17000. includes
 programs funded in whole or in part by County Medical Services Program (CMSP), California Healthcare for
 Indigents Program (CHIP), and/or other Realignment Funds whether or not a bill is rendered.
- Other Government Any form of payment from government agencies, whether local, state, federal or foreign, except those listed above. Includes funds received through California Children Services (CCS), the Civilian Health and Medical Program of the Uniformed Services (TRICARE), and the Veterans Administration.
- Other Indigent Patients receiving care pursuant to Hill-Burton obligations or who meet the standards for charity care pursuant to the hospital's established charity care policy.
- <u>Self Pay</u> Payment directly by the patient, personal guarantor, relatives, or friends. The greatest share of patient's bill is not expected to be paid by any form of insurance or other health plan.
- Other Payer Any third party payment not included above. Included are cases where no payment will be required by the facility, such as special research or courtesy patients.

EXPECTED SOURCE OF PAYMENT PAYER TYPE OF COVERAGE

FIELD NAME: : PAY_TYPE

DEFINITION : This code indicates the type of coverage for the following: Medicare, Medi-

Cal, Private Coverage, Workers' Compensation, County Indigent Programs.

and Other Government.

CODES, CATEGORIES AND COMMENTS:

Codes Category

1 = Managed Care - Knox-Keene/MCOHS

2 = Managed Care – Other3 = Traditional Coverage

Payer Type field is not considered applicable for payer categories other than:

Medicare, Medi-Cal, Private Coverage, Worker's Compensation, County

Indigent or Other Government.

All other values of Payer Type are not considered valid.

<u>Managed Care - Knox/Keene-Medi-Cal County Organized Health System</u>. Healthcare service plans, including Health Maintenance Organizations (HMO), licensed by the Department of Corporations under the Knox-Keene Healthcare Service Plan Act of 1975. Includes Medi-Cal County Organized Health Systems (MCOHS).

<u>Managed Care-Other</u>. - Healthcare plans, except those above, which provide managed care to enrollees through a panel of providers on a pre-negotiated or per diem basis, usually involving utilization review. Includes Preferred Provider Organization (PPO), Exclusive Provider Organization (EPO), Exclusive Provider Organization with Point-of-Service option (POS).

<u>Traditional Coverage</u>. - All other forms of healthcare coverage, including the Medicare prospective payment system, indemnity or fee-for-service plans, or other fee-for-service payers.

EXPECTED SOURCE OF PAYMENT PAYER PLAN CODE

FIELD NAME: : PAY_PLAN

DEFINITION : This four-digit code number refers to the name of those plans which are

licensed under the Knox-Keene Healthcare Service Plan Act of 1975 or

designated as a Medi-Cal County Organized Health System (MCOHS).

CODES, CATEGORIES AND COMMENTS:

The Plan code number represents the name of the Knox-Knee licensed plan or the Medi-Cal County Organized Health System. See Appendix E for the plan code names and numbers.

If the Payer Plan Code field is not applicable, determined by Type of Coverage, the Plan Code is zero filled (i.e. assigned a value of "0000").

Only values for Payer Plan, listed in Appendix E, are considered valid.

If the plan **code numbers** are the **same** and the **plan names** are different, it means they belong to same "parent" plan.

TOTAL CHARGES

FIELD NAME : CHARGE

DEFINITION : Total Charges include all charges for services rendered during the length of

stay for patient care at the facility, based on the hospital's full established

rates.

CODES, CATEGORIES AND COMMENTS:

Charges include, but are not limited to, daily hospital services, ancillary services and any patient care services. Hospital-based physician fees are excluded. Prepayment (e.g. deposits and prepaid admissions) are not deducted from Total Charges.

If a patient's length of stay is more than 1 year (365 days), Total Charges are reported for the last year (365 days) of stay only. To calculate Adjusted Total Charges for stays over one year use the following formula:

(Total Charges / 365 days) x Length of Stay = Adjusted Total Charges

Total Charges are expressed in whole dollars. However, there is a specific meaning attached to the three values of "total charges," below:

Where total charges equal 1 - the "1" is a code meaning that there were <u>no</u> (\$0) charges generated for the hospital stay (and was verified by the hospital). All Shriner's Hospital discharges are coded as "1" because they do not charge their patients. Note - The "1" allows the aggregation of all discharges with "valid total charges" by selecting those with total charges greater than zero.

Where total charges equal 0 - the "0" is a code meaning that there was a charge, but that the amount of the charge could not be reported by the hospital. For example, all Kaiser Foundation Hospitals are exempted from reporting total charges because they do not charge specifically for an inpatient stay, rather, they receive a constant monthly (capitated) payment from each member, whether or not that member is hospitalized, or received outpatient care or no care at all.

Where total Charges equal 9999999 -The total charge of "9999999" indicates the actual charges exceed the seven digit field size utilized by the hospital or designated agent.

EXTERNAL CAUSE OF INJURY -- PRINCIPAL E-CODE

FIELD NAME : ECODE_P

DEFINITION : The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-

Codes), that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-Codes sufficient to describe the external cause are reported for discharges with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. The principal E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

To assure uniform reporting of E-Codes, when multiple codes are required to completely classify the cause, the first (principal) E-code will describe the mechanism that resulted in the most severe injury, poisoning, or adverse effect.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes are specified in Chapter 17 of the ICD-9-CM codebook. External cause of injury was not required for discharges before July 1, 1990.

CODE STRUCTURE (examples):

Content of Field: <u>E9068</u> Would be read as: <u>E906.8</u> Content of Field: <u>E899</u> Would be read as: <u>E899</u>. (Implied decimal is read after the first four positions.)

EXTERNAL CAUSE OF INJURY - OTHER E-CODES

FIELD NAME : ECODE1, ECODE2, ECODE3, and ECODE4

DEFINITION

The external cause of injury consists of the ICD-9-CM codes E800-E999 (E-Codes), that are used to describe the external cause of injuries, poisonings, and adverse effects. If the information is available in the medical record, E-codes sufficient to describe the external cause are reported for discharges with a principal and/or other diagnoses classified as injuries or poisonings in Chapter 17 of the ICD-9-CM (800-999), or where a code from Chapters 1-16 of the ICD-9-CM (001-799) indicates that an additional E-code is applicable. The reporting of E-Codes in the range E870-E879 (misadventures and abnormal reactions) is not required. An E-Code is reported only for the inpatient hospitalization during which the injury, poisoning, and/or adverse effect was first diagnosed and/or treated.

If the principal E-Code does not include a description of the place of occurrence of the most severe injury, or poisoning, an additional E-Code is reported to designate the place of occurrence, if available in the medical record. Place of occurrence is coded as E849.0 - E849.9. Up to three additional E-codes will be reported, if necessary to completely describe the mechanism(s) that contributed to, or the causal events surrounding, any injury or poisoning, or adverse effect first diagnosed and/or treated during the current inpatient hospitalization.

CODES, CATEGORIES AND COMMENTS:

The valid E-Codes specified in Chapter 17 of the ICD-9-CM codebook. External cause of injury was not required for discharges before July 1, 1990.

CODE STRUCTURE (examples):

Content of Field: <u>E9068</u> Would be read as: <u>E906.8</u> Content of Field: <u>E899</u> Would be read as: <u>E899.</u> (Implied decimal is read after the first four positions.)

MAJOR DIAGNOSTIC CATEGORY (MDC)

MDC FIELD NAME

DEFINITION MDCs are mutually exclusive categories containing all possible principal

diagnosis areas. The diagnoses in each MDC correspond to a single major organ system or etiology, and in general are associated with a particular medical specialty. Some MDCs are residual categories containing diseases or disorders that could not be assigned to an organ system-based MDC. OSHPD purchases the DRG Grouper software from Centers for Medicare and Medicaid Services (CMS) contractor, 3M® Health Information Systems. CMS implements revisions to the DRG Grouper software effective October 1, the start of the Federal fiscal year for the Medicare Prospective Payment System. The Office implements the same software effective with discharges from the beginning of the following calendar year. DRG Grouper Version 18.0, which was implemented by CMS on October 1, 2000, is the DRG Grouper applied to

the Office's calendar year 2001 patient discharge data.

The MDC is based on the principal diagnosis. The MDC is given "00" for records where the principal diagnosis is not an existing ICD-9-CM code. Beginning with 1993 data, new codes after October 1, are "mapped" by OSHPD's own mapping logic system to the closest equivalent code recognized by the DRG Grouper Version for that calendar year and assigned to an MDC based on that DRG Grouper Version's logic.

CODES, CATEGORIES AND COMMENTS:

Codes: 00-25

MDC 00 is the label for records that could not be assigned to MDCs 1-25 by the DRG grouper (e.g. some records from DRG 470 (ungroupable).

Appendix B displays the MDC descriptions.

DIAGNOSIS RELATED GROUP (DRG)

FIELD NAME : DRG

DEFINITION : DRGs are case-mix assignments grouping hospital patients to categories

based on diagnostic, therapeutic and demographic characteristics for the purpose of reimbursement. OSHPD purchases the DRG Grouper software from Centers for Medicare and Medicaid Services (CMS) contractor, 3M® Health Information Systems. CMS implements revisions to the DRG Grouper software every October 1, the start of Federal fiscal year for the Medicare Prospective Payment System. The Office implements the same software effective with discharges from the beginning of the following calendar year. Special note - New codes after October 1, are "mapped" by OSHPD's own mapping logic system to the closest equivalent code recognized by the DRG Grouper Version for that calendar year and assigned to a DRG based on that

DRG Grouper Version's logic.

CODES, CATEGORIES AND COMMENTS:

Codes: 001-511

Appendix C displays the DRG descriptions.

The following indicates the DRG Grouper Version used during recent years:

Calendar Year 1995 = Version 12.0 HCFA DRG Grouper Calendar Year 1996 = Version 13.0 HCFA DRG Grouper Calendar Year 1997 = Version 14.0 HCFA DRG Grouper Calendar Year 1998 = Version 15.0 HCFA DRG Grouper Calendar Year 1999 = Version 16.0 HCFA DRG Grouper Calendar Year 2000 = Version 17.0 HCFA DRG Grouper

Calendar Year 2001 = Version 18.0 HCFA DRG Grouper

PRINCIPAL DIAGNOSIS

FIELD NAME : DIAG_P

DEFINITION : The condition established, after study, to be the chief cause of the admission

of the patient to the facility for care.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered for this data element are specified in the International Classification of Diseases, 9th Revision, Clinical Modification, U.S. Department of Health and Human Services, Washington D.C. (ICD-9-CM).

Beginning with 1999, the psychiatric codes from the Diagnostic and Statistical Manual of Mental Disorders (DSM), by American Psychiatric Association, Washington, D.C. are not accepted by OSHPD.

Note: Morphology codes are not accepted by OSHPD. SNODO codes are not accepted by OSHPD. Codes from the Supplementary Classification of External causes (E-Code) of Injury and Poisoning are not accepted in the Principal Diagnosis field. Italicized ICD-9-CM codes are not accepted in the Principal Diagnosis field.

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81 Would be read as: 344.1

(Implied decimal is read after the first three character positions.)

CONDITION PRESENT AT ADMISSION

(for the Principal Diagnosis)

FIELD NAME : CPOA_P

DEFINITION : The indicator for whether or not the condition was present at admission by

reporting Yes, No, or Uncertain for the Principal Diagnosis.

CODES, CATEGORIES AND COMMENTS:

The indicator for the principal diagnosis is defaulted to Yes (present at admission), unless reported otherwise.

 Code
 Category

 Y
 =
 Yes

 N
 =
 No

 U
 =
 Uncertain

All other values of Condition Present At Admission are not considered valid.

Detailed parameters for reporting Condition Present At Admission are available in the California Patient Discharge Data Reporting Manual, Third Edition.

PRINCIPAL PROCEDURE

FIELD NAME : PROC_P

DEFINITION : The principal procedure is one which was performed for definitive treatment

rather than one performed for diagnostic or exploratory purposes, or which

was necessary to take care of a complication.

The principal procedure is the procedure most related to the principal

diagnosis.

If only non-therapeutic procedures were performed, then a significant non-therapeutic procedure should be reported. A significant procedure is one that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk,

or affects DRG assignment.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered are specified in the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Washington, D.C.

Note: HCPCS and CPT codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: 022 Would be read as: 02.2 Content of Field: 0293 Would be read as: 02.93 (Implied decimal is read after the first two positions.)

DAYS FROM ADMISSION TO PRINCIPAL PROCEDURE

FIELD NAME : PROC_PDY

DEFINITION : The number of days between the patient's admission date and the date of the

Principal Procedure.

CODES, CATEGORIES AND COMMENTS:

If the Principal Procedure was performed prior to admission, this numeric value will be prefixed with a minus (-) sign. The days are calculated by subtracting the date of admission from the date of the Principal Procedure. If the Principal Procedure was performed on the day of admission, the number of days will be zero. If no Principal Procedure or date is reported, the days are shown as zero. The maximum value is 9999, which means that the procedure was performed more than 9998 days after admission.

Through 2000, if no procedure was performed, the days to procedure were shown as -999. For procedures performed on the same day as admission, the days were displayed as zero.

Some hospitals report procedures performed on their inpatients, on an outpatient basis by another facility, <u>during the patient's stay</u> at the reporting hospital. Therefore, not all procedures reported by a hospital were necessarily performed by and at that hospital.

OTHER DIAGNOSES (24 Other Diagnoses)

FIELD NAME : ODIAG1 to ODIAG24

DEFINITION : Conditions that coexist at the time of admission, develop subsequently during

the hospital stay, affect the treatment received, or affect the length of stay.

CODES, CATEGORIES AND COMMENTS:

Beginning with 1999, the psychiatric codes from Diagnostic and Statistical Manual of Mental Disorders (DSM), by American Psychiatric Association, Washington D.C., are not accepted by OSHPD.

The appropriate codes to be entered are specified in the International Classification of Diseases 9th Revision, Clinical Modification, U.S. Department of Health and Human Services, Washington, D.C. (ICD-9-CM).

Other Diagnoses do not include E-Codes. E-Codes are located in special E-Code fields.

Note: Morphology or SNODO codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: V5781 Would be read as: V57.81 Content of Field: 3441 Would be read as: 344.1 (Implied decimal is read after the first three positions.)

CONDITION PRESENT AT ADMISSION (for the Other Diagnoses)

FIELD NAME : CPOA1 to CPOA24

DEFINITION : The indicator for whether or not the condition was present at admission by

reporting Yes, No, or Uncertain for all Other Diagnoses.

CODES, CATEGORIES AND COMMENTS:

Code Category
Y = Yes
N = No
U = Uncertain

All other values of Condition Present At Admission are not considered valid.

Detailed parameters for reporting Condition Present At Admission are available in the California Patient Discharge Data Reporting Manual, Third Edition.

OTHER PROCEDURES (Maximum 20)

FIELD NAME : OPROC1 to OPROC20

DEFINITION : The procedure code is reported according to the ICD-9-CM. A procedure

is considered significant when it is a surgical risk, procedural risk,

anesthetic risk or is needed for DRG assignment.

CODES, CATEGORIES AND COMMENTS:

The appropriate codes to be entered are specified in the International Classification of Diseases 9th Revision, Clinical Modification (ICD-9-CM), U.S. Department of Health and Human Services, Washington, D.C. All significant procedures that are surgical in nature or carry procedural risk, or carry an anesthetic risk, or affect DRG assignment, are reported.

Note: HCPCS and CPT codes are not accepted by OSHPD.

CODE STRUCTURE (examples):

Content of Field: <u>022</u> Would be read as: <u>02.2</u> Content of Field: <u>0293</u> Would be read as: <u>02.93</u> (Implied decimal is read after the first two positions.)

DAYS FROM ADMISSION TO OTHER PROCEDURES

FIELD NAME : PROCDY1 to PROCDY20

DEFINITION : The number of days between the patient's admission date and the date of the

Other Procedure.

CODES, CATEGORIES AND COMMENTS:

If Other Procedures were performed prior to admission, the numeric value will be prefixed with a minus (-) sign. The days are calculated by subtracting the date of admission from the date of the Other Procedure. If the Other Procedures were performed on the day of admission, the number of days will be zero. If no Other Procedures or dates are reported, the days are shown as zero. The maximum value is 9999, which means that the procedure was performed more than 9998 days after admission.

Through 2000, if no procedure was performed, the days to procedure were shown as -999. For procedures performed on the same day as admission, the days were displayed as zero.

Some hospitals report procedures performed on their inpatients, on an outpatient basis by another facility, <u>during the patient's stay</u> at the reporting hospital. Therefore, not all procedures reported by a hospital were necessarily performed by and at that hospital.

APPENDICES

A full set of appendix files in a portable document format (.pdf) is included for viewing and printing. In addition, a subset of appendices are duplicated in comma-delimited text format (.txt). These text files can be used with relational database software to link code numbers from the data with their respective labels (e.g., the Hospital ID Number, (OSHPD_ID), from the data set can be matched with the hospital name in Appendix F). See the tables below for descriptions of the appendices.

	APPENDICES PDF Files			
The	complete set of Appendices (PDF format)	is located in the "Appendices_02_pdf" folder.		
Appendices	File Name	PDF files must be viewed/read with Adobe Acrobat Reader		
Α	App_A_counties.pdf	Listing of California counties (names and codes).		
В	App_B_mdc.pdf	Listing of Major Diagnostic Categories (names and codes)		
С	App_C_drg.pdf	Listing of Diagnosis Related Groups (names and codes)		
D	App_D_exceptions.pdf	Data Exceptions (Approved Requests for Modifications and Non-Compliances)		
Е	App_E_plan_codes.pdf	Plan Codes for Expected Source of Payment		
F	App_F_hospital_list.pdf	Listing of all hospitals in data set (Hospital ID#, Name, ZIP, and total discharges)		
G	App_G_report_form.pdf	Manual Abstract Reporting Form (OSHPD-1370)		
Н	App_H_consolidated_hospitals.pdf	Listing of all hospital locations on Consolidated Licenses		
I	App_I_data_fields.pdf	Data Fields, comma delimited format, public set		
J	App_J_masked_field_freqs.pdf	Frequencies, by Value, of Fields Subject to Masking		

	APPENDICES TXT Files			
A duplicate,	sub-set of Appendices (comma delimited t	ext) is located in the "Appendices_02_text" folder.		
Appendices File Name		The text files below can be used as database tables to link codes with labels		
Α	App_A_counties.txt	Listing of California counties (names and codes)		
В	App_B_mdc.txt	Listing of Major Diagnostic Categories (names and codes)		
С	App_C_drg.txt	Listing of Diagnosis Related Groups (names and codes)		
E	App_E_plan_codes.txt	Plan Codes for Expected Source of Payment		
F	App_F_hospital_list.txt	Listing of all hospitals in data set (Hospital ID#, Name, ZIP, and total discharges)		

APPENDIX A

COUNTIES OF CALIFORNIA

NAMES AND CODE NUMBERS

(Small County Codes in parentheses)

CC	DUNTY	CC	DUNTY	COUNTY		
#	<u>Name</u>	#	<u>Name</u>	#	<u>Name</u>	
01	Alameda	20	Madera	40	San Luis Obispo	
02	Alpine (CE)	21	Marin	41	San Mateo	
03	Amador	22	Mariposa (CE)	42	Santa Barbara	
04	Butte	23	Mendocino	43	Santa Clara	
05	Calaveras	24	Merced	44	Santa Cruz	
06	Colusa (NW)	25	Modoc (NE)	45	Shasta	
07	Contra Costa	26	Mono (CE)	46	Sierra (NE)	
80	Del Norte	27	Monterey	47	Siskiyou	
09	El Dorado	28	Napa	48	Solano	
10	Fresno	29	Nevada	49	Sonoma	
11	Glenn (NW)	30	Orange	50	Stanislaus	
12	Humboldt	31	Placer	51	Sutter	
13	Imperial	32	Plumas (NE)	52	Tehama	
14	Inyo (CE)	33	Riverside	53	Trinity (NW)	
15	Kern	34	Sacramento	54	Tulare	
16	Kings	35	San Benito	55	Tuolumne	
17	Lake	36	San Bernardino	56	Ventura	
18	Lassen	37	San Diego	57	Yolo	
19	Los Angeles	38	San Francisco	58	Yuba	
		39	San Joaquin			
Small	County Groups:	CE	= Central Cour	nties		
		NE	= Northeastern Counties			
		NW	= Northwesterr	i Count	ies	

APPENDIX B

Major Diagnostic Categories (MDCs) 2002

DRG Grouper Version 19.0

MDC	Description
01	Diseases & Disorders Of The Nervous System
02	Diseases & Disorders Of The Eye
03	Diseases & Disorders Of The Ear, Nose, Mouth & Throat
04	Diseases & Disorders Of The Respiratory System
05	Diseases & Disorders Of The Circulatory System
06	Diseases & Disorders Of The Digestive System
07	Diseases & Disorders Of The Hepatobiliary System & Pancreas
80	Diseases & Disorders Of The Musculoskeletal System & Connective Tissue
09	Diseases & Disorders Of The Skin, Subcutaneous Tissue & Breast
10	Endocrine, Nutritional & Metabolic Diseases & Disorders
11	Diseases & Disorders Of The Kidney & Urinary Tract
12	Diseases & Disorders Of The Male Reproductive System
13	Diseases & Disorders Of The Female Reproductive System
14	Pregnancy, Childbirth & The Puerperium
15	Newborns & Other Neonates With Conditions Originating In The Perinatal Period
16	Diseases & Disorders Of Blood & Blood Forming Organs & Immunological Disorders
17	Myeloproliferative Diseases & Disorders & Poorly Differentiated Neoplasms
18	Infectious & Parasitic Diseases (Systemic Or Unspecified Sites)
19	Mental Diseases & Disorders
20	Alcohol/Drug Use & Alcohol/Drug Induced Organic Mental Disorders
21	Injuries, Poisonings & Toxic Effects Of Drugs
22	Burns
23	Factors Influencing Health Status & Other Contacts With Health Services
24	Multiple Significant Trauma
25	Human Immunodeficiency Virus Infections
00	Ungroupable

Source: DRGs: Diagnosis Related Groups Definitions Manual, Version 19.0, effective 10/1/01, Developed for the federal Health Care Financing Administration by 3M® Health Information Systems, New Haven CT 06511

DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

		Med/	DRG Grouper Version 19.0
DRG	MDC	Surg	Description
001	01	Р	Craniotomy Age >17 Except For Trauma
002	01	Р	Craniotomy For Trauma Age >17
003	01	Р	Craniotomy Age 0-17
004	01	Р	Spinal Procedures
005	01	Р	Extracranial Vascular Procedures
006	01	Р	Carpal Tunnel Release
007	01	Р	Periph & Cranial Nerve & Other Nerv Syst Proc w cc
800	01	Р	Periph & Cranial Nerve & Other Nerv Syst Proc w/o cc
009	01	M	Spinal Disorders & Injuries
010	01	M	Nervous System Neoplasms w cc
011	01	М	Nervous System Neoplasms w/o cc
012	01	М	Degenerative Nervous System Disorders
013	01	М	Multiple Sclerosis & Cerebellar Ataxia
014	01	М	Specific Cerebrovascular Disorders Except Tia
015	01	М	Transient Ischemic Attack & Precerebral Occlusions
016	01	М	Nonspecific Cerebrovascular Disorders w cc
017	01	М	Nonspecific Cerebrovascular Disorders w/o cc
018	01	М	Cranial & Peripheral Nerve Disorders w cc
019	01	М	Cranial & Peripheral Nerve Disorders w/o cc
020	01	М	Nervous System Infection Except Viral Meningitis
021	01	М	Viral Meningitis
022	01	М	Hypertensive Encephalopathy
023	01	М	Nontraumatic Stupor & Coma
024	01	М	Seizure & Headache Age >17 w cc
025	01	М	Seizure & Headache Age >17 w/o cc
026	01	М	Seizure & Headache Age 0-17
027	01	М	Traumatic Stupor & Coma, Coma >1 Hr
028	01	М	Traumatic Stupor & Coma, Coma <1 Hr Age >17 w cc
029	01	М	Traumatic Stupor & Coma, Coma <1 Hr Age >17 w/o cc
030	01	М	Traumatic Stupor & Coma, Coma <1 Hr Age 0-17
031	01	М	Concussion Age >17 w cc
032	01	М	Concussion Age >17 w/o cc
033	01	М	Concussion Age 0-17
034	01	М	Other Disorders Of Nervous System w cc
035	01	M	Other Disorders Of Nervous System w/o cc
036	02	P	Retinal Procedures
037	02	P	Orbital Procedures
038	02	P	Primary Iris Procedures
039	02	Р	Lens Procedures With or Without Vitrectomy
040	02	Р	Extraocular Procedures Except Orbit Age >17
041	02	Р	Extraocular Procedures Except Orbit Age 0-17
042	02	P	Intraocular Procedures Except Retina, Iris & Lens
043	02	M	Hyphema
044	02	M	Acute Major Eye Infections
045	02	M	Neurological Eye Disorders
046	02	M	Other Disorders Of The Eye Age >17 w cc
047	02	M	Other Disorders Of The Eye Age >17 w/o cc
048	02	M	Other Disorders Of The Eye Age 0-17
049	03	Р	Major Head & Neck Procedures
050 051	03	P D	Sialoadenectomy
051 053	03	P D	Salivary Gland Procedures Except Sialoadenectomy
052 053	03 03	P D	Cleft Lip & Palate Repair
053 054	03	P P	Sinus & Mastoid Procedures Age >17 Sinus & Mastoid Procedures Age 0-17
054	03	P	•
056	03	P	Miscellaneous Ear, Nose, Mouth & Throat Procedures Rhinoplasty
000	00	'	Tulliopidoty

C - 1 7/25/03

DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

550		Med/	DRG Grouper version 19.0
DRG	MDC	Surg	Description The Property Tone Management of the Administrative Color Adm
057 058	03 03	P P	T&A Proc, Except Tonsillectomy &/or Adenoidectomy Only, Age >17
059	03	' P	T&A Proc, Except Tonsillectomy &/or Adenoidectomy Only, Age 0-17 Tonsillectomy &/or Adenoidectomy Only, Age >17
060	03	' P	Tonsillectomy ∨ Adenoidectomy Only, Age 0-17 Tonsillectomy ∨ Adenoidectomy Only, Age 0-17
061	03	Р	Myringotomy w Tube Insertion Age >17
062	03	Р	Myringotomy w Tube Insertion Age 0-17
063	03	Р	Other Ear, Nose, Mouth & Throat O.R. Procedures
064	03	М	Ear, Nose, Mouth & Throat Malignancy
065	03	M	Dysequilibrium
066	03	M	Epistaxis
067	03	M	Epiglottitis
068	03	M	Otitis Media & URI Age >17 w cc
069	03	M	Otitis Media & URI Age >17 w/o cc
070	03	M	Otitis Media & URI Age 0-17
071	03	M	Laryngotracheitis
072	03	M	Nasal Trauma & Deformity
073	03	M	Other Ear, Nose, Mouth & Throat Diagnoses Age >17
074	03	M	Other Ear, Nose, Mouth & Throat Diagnoses Age 0-17
075	04	Р	Major Chest Procedures
076	04	Р	Other Resp System O.R. Procedures w cc
077	04	P	Other Resp System O.R. Procedures w/o cc
078	04	M	Pulmonary Embolism
079	04	M	Respiratory Infections & Inflammations Age >17 w cc
080	04	M	Respiratory Infections & Inflammations Age >17 w/o cc
081	04	M	Respiratory Infections & Inflammations Age 0-17
082 083	04	M	Respiratory Neoplasms
084	04 04	M M	Major Chest Trauma w/o co
085	04	M	Major Chest Trauma w/o cc Pleural Effusion w cc
086	04	M	Pleural Effusion w/o cc
087	04	M	Pulmonary Edema & Respiratory Failure
088	04	M	Chronic Obstructive Pulmonary Disease
089	04	M	Simple Pneumonia & Pleurisy Age >17 w cc
090	04	М	Simple Pneumonia & Pleurisy Age >17 w/o cc
091	04	М	Simple Pneumonia & Pleurisy Age 0-17
092	04	M	Interstitial Lung Disease w cc
093	04	M	Interstitial Lung Disease w/o cc
094	04	M	Pneumothorax w cc
095	04	M	Pneumothorax w/o cc
096	04	M	Bronchitis & Asthma Age >17 w cc
097	04	M	Bronchitis & Asthma Age >17 w/o cc
098	04	M	Bronchitis & Asthma Age 0-17
099	04	M	Respiratory Signs & Symptoms w cc
100	04	M	Respiratory Signs & Symptoms w/o cc
101	04	M	Other Respiratory System Diagnoses w cc
102	04	M	Other Respiratory System Diagnoses w/o cc
103	05		Heart Transplant
104	05	Р	Cardiac Valve & Other Major Cardiothoracic Proc w Cardiac Cath
105	05	Р	Cardiac Valve & Other Major Cardiothoracic Proc w/o Cardiac Cath
106	05	Р	Coronary Bypass w Ptca
107	05 05	Р	Coronary Bypass w Cardiac Cath
108	05 05	P	Other Cardiothoracic Procedures
109 110	05 05	P P	Coronary Bypass w/o Cardiac Cath Major Cardiavascular Procedures w co
110	05 05	P P	Major Cardiovascular Procedures w cc Major Cardiovascular Procedures w/o cc
113	05	P	Amputation For Circ System Disorders Except Upper Limb & Toe
113	00	'	Amparation For One Gystem Disorders Except Opper Limb & 100

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

		Med/	DRG Grouper Version 19.0
DRG	MDC	Surg	Description
114	05	Р	Upper Limb & Toe Amputation For Circ System Disorders
115	05	P -	Prm Card Pacem Impl w AMI,Hrt Fail or Shk,Or Aicd Lead or Gnrtr Proc
116	05	P -	Other Permanent Cardiac Pacemaker Implant
117	05	Р	Cardiac Pacemaker Revision Except Device Replacement
118	05	Р	Cardiac Pacemaker Device Replacement
119	05	Р	Vein Ligation & Stripping
120	05 05	Р	Other Circulatory System O.R. Procedures
121 122	05 05	M	Circulatory Disorders w AMI & Major Comp, Discharged Alive
123	05	M M	Circulatory Disorders w AMI w/o Major Comp, Discharged Alive
123	05	M	Circulatory Disorders w AMI, Expired Circulatory Disorders Except AMI, w Card Cath & Complex Diag
125	05	M	Circulatory Disorders Except AMI, w Card Cath & Complex Diag Circulatory Disorders Except AMI, w Card Cath w/o Complex Diag
126	05	M	Acute & Subacute Endocarditis
127	05	M	Heart Failure & Shock
128	05	М	Deep Vein Thrombophlebitis
129	05	М	Cardiac Arrest, Unexplained
130	05	М	Peripheral Vascular Disorders w cc
131	05	М	Peripheral Vascular Disorders w/o cc
132	05	М	Atherosclerosis w cc
133	05	М	Atherosclerosis w/o cc
134	05	М	Hypertension
135	05	М	Cardiac Congenital & Valvular Disorders Age >17 w cc
136	05	М	Cardiac Congenital & Valvular Disorders Age >17 w/o cc
137	05	М	Cardiac Congenital & Valvular Disorders Age 0-17
138	05	M	Cardiac Arrhythmia & Conduction Disorders w cc
139	05	M	Cardiac Arrhythmia & Conduction Disorders w/o cc
140	05	М	Angina Pectoris
141	05	М	Syncope & Collapse w cc
142	05	М	Syncope & Collapse w/o cc
143	05	М	Chest Pain
144	05	М	Other Circulatory System Diagnoses w cc
145	05	M	Other Circulatory System Diagnoses w/o cc
146	06	Р	Rectal Resection w cc
147	06	Р	Rectal Resection w/o cc
148	06	P P	Major Small & Large Bowel Procedures w cc
149 150	06	=	Major Small & Large Bowel Procedures w/o cc
150 151	06 06	P P	Peritoneal Adhesiolysis w cc Peritoneal Adhesiolysis w/o cc
151	06	Р	Minor Small & Large Bowel Procedures w cc
153	06	Р	Minor Small & Large Bowel Procedures w/o cc
154	06	Р	Stomach, Esophageal & Duodenal Procedures Age >17 w cc
155	06	Р	Stomach, Esophageal & Duodenal Procedures Age >17 w/o cc
156	06	Р	Stomach, Esophageal & Duodenal Procedures Age 0-17
157	06	Р	Anal & Stomal Procedures w cc
158	06	Р	Anal & Stomal Procedures w/o cc
159	06	Р	Hernia Procedures Except Inguinal & Femoral Age >17 w cc
160	06	Р	Hernia Procedures Except Inguinal & Femoral Age >17 w/o cc
161	06	Р	Inguinal & Femoral Hernia Procedures Age >17 w cc
162	06	Р	Inguinal & Femoral Hernia Procedures Age >17 w/o cc
163	06	Р	Hernia Procedures Age 0-17
164	06	Р	Appendectomy w Complicated Principal Diag w cc
165	06	Р	Appendectomy w Complicated Principal Diag w/o cc
166	06	Р	Appendectomy w/o Complicated Principal Diag w cc
167	06	Р	Appendectomy w/o Complicated Principal Diag w/o cc
168	03	Р	Mouth Procedures w cc
169	03	Р	Mouth Procedures w/o cc

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

DRG	MDC	Med/ Surg	DRG Grouper version 19.0
170	06	P	Other Digestive System O.R. Procedures w cc
170	06	Р	Other Digestive System O.R. Procedures w co
172	06	M	Digestive Malignancy w cc
173	06	M	Digestive Malignancy w/o cc
174	06	M	G.I. Hemorrhage w cc
175	06	M	G.I. Hemorrhage w/o cc
176	06	M	Complicated Peptic Ulcer
177	06	M	Uncomplicated Peptic Ulcer w cc
178	06	M	Uncomplicated Peptic Ulcer w/o cc
179	06	M	Inflammatory Bowel Disease
180	06	M	G.I. Obstruction w cc
181	06	M	G.I. Obstruction w/o cc
182	06	M	Esophagitis, Gastroent & Misc Digest Disorders Age >17 w cc
183	06	M	Esophagitis, Gastroent & Misc Digest Disorders Age >17 w/o cc
184	06	M	Esophagitis, Gastroent & Misc Digest Disorders Age 0-17
185	03	M	Dental & Oral Dis Except Extractions & Restorations, Age >17
186	03	M	Dental & Oral Dis Except Extractions & Restorations, Age 0-17
187	03	M	Dental Extractions & Restorations
188	06	M	Other Digestive System Diagnoses Age >17 w cc
189	06	М	Other Digestive System Diagnoses Age >17 w/o cc
190	06	M	Other Digestive System Diagnoses Age 0-17
191	07	Р	Pancreas, Liver & Shunt Procedures w cc
192	07	Р	Pancreas, Liver & Shunt Procedures w/o cc
193	07 07	Р	Biliary Tract Proc Except Only Cholecyst w or w/o C.D.E. w cc
194 195	07 07	P P	Biliary Tract Proc Except Only Cholecyst w or w/o C.D.E. w/o cc
195	07	P	Cholecystectomy w C.D.E. w cc Cholecystectomy w C.D.E. w/o cc
197	07	' P	Cholecystectomy Except By Laparoscope w/o C.D.E. w cc
198	07	Р	Cholecystectomy Except By Laparoscope w/o C.D.E. w/o cc
199	07	Р	Hepatobiliary Diagnostic Procedure For Malignancy
200	07	P	Hepatobiliary Diagnostic Procedure For Non-Malignancy
201	07	Р	Other Hepatobiliary or Pancreas O.R. Procedures
202	07	M	Cirrhosis & Alcoholic Hepatitis
203	07	M	Malignancy Of Hepatobiliary System or Pancreas
204	07	M	Disorders Of Pancreas Except Malignancy
205	07	M	Disorders Of Liver Except Malig, Cirr, Alc Hepa w cc
206	07	M	Disorders Of Liver Except Malig, Cirr, Alc Hepa w/o cc
207	07	M	Disorders Of The Biliary Tract w cc
208	07	M	Disorders Of The Biliary Tract w/o cc
209	80	Р	Major Joint & Limb Reattachment Procedures Of Lower Extremity
210	80	Р	Hip & Femur Procedures Except Major Joint Age >17 w cc
211	80	Р	Hip & Femur Procedures Except Major Joint Age >17 w/o cc
212	80	Р	Hip & Femur Procedures Except Major Joint Age 0-17
213	08	P	Amputation For Musculoskeletal System & Conn Tissue Disorders
216	80	P -	Biopsies Of Musculoskeletal System & Connective Tissue
217	80	Р	Wnd Debrid & Skn Grft Except Hand,For Muscskelet & Conn Tiss Dis
218	80	Р	Lower Extrem & Humer Proc Except Hip,Foot,Femur Age >17 w cc
219	80	Р	Lower Extrem & Humer Proc Except Hip,Foot,Femur Age >17 w/o cc
220	80 08	P D	Lower Extrem & Humer Proc Except Hip,Foot,Femur Age 0-17 Major Shoulder/Elbow Brog, or Other Lipper Extremity Brog week
223	80 08	P D	Major Shoulder/Elbow Proc, or Other Upper Extremity Proc w cc
224 225	08 08	P P	Shoulder, Elbow or Forearm Proc, Exc Major Joint Proc, w/o cc
225 226	08	P	Foot Procedures Soft Tissue Procedures w cc
227	08	г Р	Soft Tissue Procedures w cc Soft Tissue Procedures w/o cc
228	08	Р	Major Thumb or Joint Proc, or Othr Hand or Wrist Proc w cc
229	08	Р	Hand or Wrist Proc, Except Major Joint Proc, w/o cc
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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

DRG	MDC	Med/ Surg	DRG Grouper Version 19.0 Description
230	08	Р	Local Excision & Removal Of Int Fix Devices Of Hip & Femur
231	08	Р	Local Excision & Removal Of Int Fix Devices Except Hip & Femur
232	08	Р	Arthroscopy
233	08	P	Other Musculoskelet Sys & Conn Tiss O.R. Proc w cc
234	08	Р	Other Musculoskelet Sys & Conn Tiss O.R. Proc w/o cc
235	80	M	Fractures Of Femur
236	80	M	Fractures Of Hip & Pelvis
237	80	M	Sprains, Strains, & Dislocations Of Hip, Pelvis & Thigh
238	80	M	Osteomyelitis
239	80	M	Pathological Fractures & Musculoskeletal & Conn Tiss Malignancy
240	80	M	Connective Tissue Disorders w cc
241	80	M	Connective Tissue Disorders w/o cc
242	80	M	Septic Arthritis
243	80	M	Medical Back Problems
244	80	M	Bone Diseases & Specific Arthropathies w cc
245	80	M	Bone Diseases & Specific Arthropathies w/o cc
246	80	M	Non-Specific Arthropathies
247	80	M	Signs & Symptoms Of Musculoskeletal System & Conn Tissue
248	80	M	Tendonitis, Myositis & Bursitis
249	80	M	Aftercare, Musculoskeletal System & Connective Tissue
250	80	M	Fx, Sprn, Strn & Disl Of Forearm, Hand, Foot Age >17 w cc
251	80	M	Fx, Sprn, Strn & Disl Of Forearm, Hand, Foot Age >17 w/o cc
252	80	M	Fx, Sprn, Strn & Disl Of Forearm, Hand, Foot Age 0-17
253	80	M	Fx, Sprn, Strn & Disl Of Uparm, Lowleg Ex Foot Age >17 w cc
254 255	08 08	M M	Fx, Sprn, Strn & Disl Of Uparm, Lowleg Ex Foot Age > 17 w/o cc
256 256	08	M	Fx, Sprn, Strn & Disl Of Uparm,Lowleg Ex Foot Age 0-17 Other Musculoskeletal System & Connective Tissue Diagnoses
257	09	P	Total Mastectomy For Malignancy w cc
258	09	Р	Total Mastectomy For Malignancy w/o cc
259	09	Р	Subtotal Mastectomy For Malignancy w cc
260	09	Р	Subtotal Mastectomy For Malignancy w/o cc
261	09	P	Breast Proc For Non-Malignancy Except Biopsy & Local Excision
262	09	Р	Breast Biopsy & Local Excision For Non-Malignancy
263	09	Р	Skin Graft &/or Debrid For Skin Ulcer or Cellulitis w cc
264	09	Р	Skin Graft &/or Debrid For Skin Ulcer or Cellulitis w/o cc
265	09	Р	Skin Graft &/or Debrid Except For Skin Ulcer or Cellulitis w cc
266	09	Р	Skin Graft &/or Debrid Except For Skin Ulcer or Cellulitis w/o cc
267	09	Р	Perianal & Pilonidal Procedures
268	09	Р	Skin, Subcutaneous Tissue & Breast Plastic Procedures
269	09	Р	Other Skin, Subcut Tiss & Breast Proc w cc
270	09	Р	Other Skin, Subcut Tiss & Breast Proc w/o cc
271	09	M	Skin Ulcers
272	09	M	Major Skin Disorders w cc
273	09	M	Major Skin Disorders w/o cc
274	09	M	Malignant Breast Disorders w cc
275	09	M	Malignant Breast Disorders w/o cc
276	09	M	Non-Maligant Breast Disorders
277	09	M	Cellulitis Age >17 w cc
278	09	M	Cellulitis Age >17 w/o cc
279	09	M	Cellulitis Age 0-17
280	09	M	Trauma To The Skin, Subcut Tiss & Breast Age >17 w cc
281	09	M	Trauma To The Skin, Subcut Tiss & Breast Age >17 w/o cc
282 283	09 09	M	Trauma To The Skin, Subcut Tiss & Breast Age 0-17
284	09	M M	Minor Skin Disorders w cc Minor Skin Disorders w/o cc
285	10	P	Amputat Of Lower Limb For Endocrine, Nutrit, & Metabol Disorders
200	.0	•	range and or Early 1 or Endourne, training included blood and

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

222		Med/	DRG Grouper Version 19.0
DRG	MDC	Surg	Description
286	10	Р	Adrenal & Pituitary Procedures
287 288	10 10	P P	Skin Grafts & Wound Debrid For Endoc, Nutrit & Metab Disorders
289	10	г Р	O.R. Procedures For Obesity Parathyroid Procedures
290	10	Р	Thyroid Procedures
291	10	' P	Thyroglossal Procedures
292	10	Р	Other Endocrine, Nutrit & Metab O.R. Proc w cc
293	10	Р	Other Endocrine, Nutrit & Metab O.R. Proc w/o cc
294	10	M	Diabetes Age >35
295	10	М	Diabetes Age 0-35
296	10	М	Nutritional & Misc Metabolic Disorders Age >17 w cc
297	10	M	Nutritional & Misc Metabolic Disorders Age >17 w/o cc
298	10	M	Nutritional & Misc Metabolic Disorders Age 0-17
299	10	M	Inborn Errors Of Metabolism
300	10	M	Endocrine Disorders w cc
301	10	M	Endocrine Disorders w/o cc
302	11	Р	Kidney Transplant
303	11	Р	Kidney, Ureter & Major Bladder Procedures For Neoplasm
304	11	Р	Kidney, Ureter & Major Bladder Proc For Non-Neopl w cc
305	11	Р	Kidney, Ureter & Major Bladder Proc For Non-Neopl w/o cc
306	11	Р	Prostatectomy w cc
307	11	Р	Prostatectomy w/o cc
308	11	Р	Minor Bladder Procedures w cc
309	11	Р	Minor Bladder Procedures w/o cc
310	11	P -	Transurethral Procedures w cc
311	11	Р	Transurethral Procedures w/o cc
312	11	Р	Urethral Procedures, Age >17 w cc
313	11	Р	Urethral Procedures, Age >17 w/o cc
314	11	Р	Urethral Procedures, Age 0-17
315 316	11 11	Р	Other Kidney & Urinary Tract O.R. Procedures
316 317	11 11	M	Renal Failure
318	11	M M	Admit For Renal Dialysis Kidney & Urinary Tract Neoplasms w cc
319	11	M	Kidney & Urinary Tract Neoplasms w/o cc
320	11	M	Kidney & Urinary Tract Infections Age >17 w cc
321	11	M	Kidney & Urinary Tract Infections Age >17 w/o cc
322	11	M	Kidney & Urinary Tract Infections Age 0-17
323	11	M	Urinary Stones w cc, &/or ESW Lithotripsy
324	11	М	Urinary Stones w/o cc
325	11	М	Kidney & Urinary Tract Signs & Symptoms Age >17 w cc
326	11	M	Kidney & Urinary Tract Signs & Symptoms Age >17 w/o cc
327	11	M	Kidney & Urinary Tract Signs & Symptoms Age 0-17
328	11	M	Urethral Stricture Age >17 w cc
329	11	M	Urethral Stricture Age >17 w/o cc
330	11	M	Urethral Stricture Age 0-17
331	11	M	Other Kidney & Urinary Tract Diagnoses Age >17 w cc
332	11	M	Other Kidney & Urinary Tract Diagnoses Age >17 w/o cc
333	11	M	Other Kidney & Urinary Tract Diagnoses Age 0-17
334	12	Р	Major Male Pelvic Procedures w cc
335	12	Р	Major Male Pelvic Procedures w/o cc
336	12	P -	Transurethral Prostatectomy w cc
337	12	P -	Transurethral Prostatectomy w/o cc
338	12	P -	Testes Procedures, For Malignancy
339	12	Р	Testes Procedures, Non-Malignancy Age >17
340	12	Р	Testes Procedures, Non-Malignancy Age 0-17
341	12	Р	Penis Procedures

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

DRG	MDC	Med/ Surg	DRG Grouper Version 19.0 Description
342	12	P	Circumcision Age >17
343	12	' P	Circumcision Age 0-17
344	12	Р	Other Male Reproductive System O.R. Procedures For Malignancy
345	12	Р	Other Male Reproductive System O.R. Proc Except For Malignancy
346	12	M	Malignancy, Male Reproductive System, w cc
347	12	М	Malignancy, Male Reproductive System, w/o cc
348	12	M	Benign Prostatic Hypertrophy w cc
349	12	M	Benign Prostatic Hypertrophy w/o cc
350	12	M	Inflammation Of The Male Reproductive System
351	12	M	Sterilization, Male
352	12	M	Other Male Reproductive System Diagnoses
353	13	Р	Pelvic Evisceration, Radical Hysterectomy & Radical Vulvectomy
354	13	Ρ	Uterine,Adnexa Proc For Non-Ovarian/Adnexal Malig w cc
355	13	Р	Uterine,Adnexa Proc For Non-Ovarian/Adnexal Malig w/o cc
356	13	Р	Female Reproductive System Reconstructive Procedures
357	13	Р	Uterine & Adnexa Proc For Ovarian or Adnexal Malignancy
358	13	Р	Uterine & Adnexa Proc For Non-Malignancy w cc
359	13	Р	Uterine & Adnexa Proc For Non-Malignancy w/o cc
360	13	Р	Vagina, Cervix & Vulva Procedures
361	13	P	Laparoscopy & Incisional Tubal Interruption
362	13	P -	Endoscopic Tubal Interruption
363	13	Р	D&C, Conization & Radio-Implant, For Malignancy
364	13	Р	D&C, Conization Except For Malignancy
365	13	Р	Other Female Reproductive System O.R. Procedures
366 367	13	M	Malignancy, Female Reproductive System w cc
367 368	13 13	M	Malignancy, Female Reproductive System w/o cc
369	13	M M	Infections, Female Reproductive System Menetrual & Other Female Reproductive System Disorders
370	14	P	Menstrual & Other Female Reproductive System Disorders Cesarean Section w cc
371	14	' P	Cesarean Section w/o cc
372	14	M	Vaginal Delivery w Complicating Diagnoses
373	14	M	Vaginal Delivery w/o Complicating Diagnoses
374	14	P	Vaginal Delivery w Sterilization &/or D&C
375	14	P	Vaginal Delivery w O.R. Proc Except Steril &/or D&C
376	14	М	Postpartum & Post Abortion Diagnoses w/o O.R. Procedure
377	14	Р	Postpartum & Post Abortion Diagnoses w O.R. Procedure
378	14	M	Ectopic Pregnancy
379	14	M	Threatened Abortion
380	14	M	Abortion w/o D&C
381	14	Р	Abortion w D&C, Aspiration Curettage or Hysterotomy
382	14	M	False Labor
383	14	M	Other Antepartum Diagnoses w Medical Complications
384	14	M	Other Antepartum Diagnoses w/o Medical Complications
385	15	M	Neonates, Died or Transferred To Another Acute Care Facility
386	15	M	Extreme Immaturity or Respiratory Distress Syndrome, Neonate
387	15	M	Prematurity w Major Problems
388	15	M	Prematurity w/o Major Problems
389	15	M	Full Term Neonate w Major Problems
390	15	M	Neonate w Other Significant Problems
391	15	M	Normal Newborn
392	16	Р	Splenectomy Age >17
393	16	Р	Splenectomy Age 0-17
394	16	Р	Other O.R. Procedures Of The Blood And Blood Forming Organs
395	16	M	Red Blood Cell Disorders Age >17
396 307	16	M	Red Blood Cell Disorders Age 0-17
397	16	M	Coagulation Disorders

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

DRG	MDC	Med/ Surg	Description
398	16	M	Reticuloendothelial & Immunity Disorders w cc
399	16	M	Reticuloendothelial & Immunity Disorders w/o cc
400	17	P	Lymphoma & Leukemia w Major O.R. Procedure
401	17	Р	Lymphoma & Non-Acute Leukemia w Other O.R. Proc w cc
402	17	Р	Lymphoma & Non-Acute Leukemia w Other O.R. Proc w/o cc
403	17	M	Lymphoma & Non-Acute Leukemia w other of Non-Acute Leukemia w oc
404	17	M	Lymphoma & Non-Acute Leukemia w/o cc
405	17	M	Acute Leukemia w/o Major O.R. Procedure Age 0-17
406	17	P	Myeloprolif Disord or Poorly Diff Neopl w Maj O.R.Proc w cc
407	17	Р	Myeloprolif Disord or Poorly Diff Neopl w Maj O.R.Proc w/o cc
408	17	Р	Myeloprolif Disord or Poorly Diff Neopl w Other O.R.Proc
409	17	M	Radiotherapy
410	17	M	Chemotherapy w/o Acute Leukemia As Secondary Diagnosis
411	17	M	History Of Malignancy w/o Endoscopy
412	17	M	History Of Malignancy w Endoscopy
413	17	M	Other Myeloprolif Dis or Poorly Diff Neopl Diag w cc
414	17	M	Other Myeloprolif Dis or Poorly Diff Neopl Diag w/o cc
415	18	P	O.R. Procedure For Infectious & Parasitic Diseases
416	18	M	Septicemia Age >17
417	18	M	Septicemia Age 0-17
418	18	M	Postoperative & Post-Traumatic Infections
419	18	M	Fever Of Unknown Origin Age >17 w cc
420	18	M	Fever Of Unknown Origin Age >17 w/o cc
421	18	M	Viral Illness Age >17
422	18	M	Viral Illness & Fever Of Unknown Origin Age 0-17
423	18	M	Other Infectious & Parasitic Diseases Diagnoses
424	19	P	O.R. Procedure w Principal Diagnoses Of Mental Illness
425	19	M	Acute Adjust Reaction & Psychosocial Dysfunction
426	19	M	Depressive Neuroses
427	19	M	Neuroses Except Depressive
428	19	M	Disorders Of Personality & Impulse Control
429	19	M	Organic Disturbances & Mental Retardation
430	19	M	Psychoses
431	19	M	Childhood Mental Disorders
432	19	M	Other Mental Disorder Diagnoses
433	20	M	Alcohol/Drug Abuse or Dependence, Left AMA
439	21	P	Skin Grafts For Injuries
440	21	Р	Wound Debridements For Injuries
441	21	Р	Hand Procedures For Injuries
442	21	Р	Other O.R. Procedures For Injuries w cc
443	21	Р	Other O.R. Procedures For Injuries w/o cc
444	21	M	Traumatic Injury Age >17 w cc
445	21	M	Traumatic Injury Age >17 w/o cc
446	21	M	Traumatic Injury Age 0-17
447	21	M	Allergic Reactions Age >17
448	21	M	Allergic Reactions Age 0-17
449	21	M	Poisoning & Toxic Effects Of Drugs Age >17 w cc
450	21	M	Poisoning & Toxic Effects Of Drugs Age >17 w/o cc
451	21	M	Poisoning & Toxic Effects Of Drugs Age 0-17 Poisoning & Toxic Effects Of Drugs Age 0-17
452	21	M	Complications Of Treatment w cc
453	21	M	Complications Of Treatment w/o cc
454	21	M	Other Injury, Poisoning & Toxic Effect Diag w cc
455	21	M	Other Injury, Poisoning & Toxic Effect Diag w/o cc
461	23	P	O.R. Proc w Diagnoses Of Other Contact w Health Services
462	23	M	Rehabilitation
463	23	M	Signs & Symptoms w cc
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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

DRG	MDC	Med/ Surg	Description
464	23	М	Signs & Symptoms w/o cc
465	23	М	Aftercare w History Of Malignancy As Secondary Diagnosis
466	23	М	Aftercare w/o History Of Malignancy As Secondary Diagnosis
467	23	М	Other Factors Influencing Health Status
468		Р	Extensive O.R. Procedure Unrelated To Principal Diagnosis
469		M	Principal Diagnosis Invalid As Discharge Diagnosis
470			Ungroupable
471	80	Р	Bilateral or Multiple Major Joint Procs Of Lower Extremity
473	17	M	Acute Leukemia w/o Major O.R. Procedure Age >17
475	04	M	Respiratory System Diagnosis With Ventilator Support
476		Р	Prostatic O.R. Procedure Unrelated To Principal Diagnosis
477		Р	Non-Extensive O.R. Procedure Unrelated To Principal Diagnosis
478	05	Р	Other Vascular Procedures w cc
479	05	Р	Other Vascular Procedures w/o cc
480		Р	Liver Transplant
481		Р	Bone Marrow Transplant
482		Р	Tracheostomy For Face, Mouth & Neck Diagnoses
483		Р	Tracheostomy Except For Face, Mouth & Neck Diagnoses
484	24	P	Craniotomy For Multiple Significant Trauma
485	24	P -	Limb Reattachment, Hip And Femur Proc For Multiple Significant Traum
486	24	P	Other O.R. Procedures For Multiple Significant Trauma
487	24	M	Other Multiple Significant Trauma
488	25	Р	HIV w Extensive O.R. Procedure
489	25	M	HIV w Major Related Condition
490 401	25	M	HIV w or w/o Other Related Condition
491 492	08 17	P M	Major Joint & Limb Reattachment Procedures Of Upper Extremity Chamethorapy W Aguta Laukamia As Sacandary Diagnosis
492	07	M P	Chemotherapy w Acute Leukemia As Secondary Diagnosis
494	07	Р	Laparoscopic Cholecystectomy w/o C.D.E. w cc Laparoscopic Cholecystectomy w/o C.D.E. w/o cc
495	01	r P	Lung Transplant
496	08	Р	Combined Anterior/Posterior Spinal Fusion
497	08	Р	Spinal Fusion Except Cervical w cc
498	08	Р	Spinal Fusion Except Cervical w/o cc
499	08	Р	Back & Neck Procedures Except Spinal Fusion w cc
500	08	Р	Back & Neck Procedures Except Spinal Fusion w/o cc
501	08	Р	Knee Procedures w PDx Of Infection w cc
502	80	Р	Knee Procedures w PDx Of Infection w/o cc
503	80	Р	Knee Procedures w/o PDx Of Infection
504	22	Р	Extensive 3Rd Degree Burns w Skin Graft
505	22	М	Extensive 3Rd Degree Burns w/o Skin Graft
506	22	Р	Full Thickness Burn w Skin Graft or Inhal Inj w cc or Sig Trauma
507	22	Р	Full Thickness Burn w Skin Graft or Inhal Inj w/o cc or Sig Trauma
508	22	M	Full Thickness Burn w/o Skin Graft or Inhal Inj w cc or Sig Trauma
509	22	M	Full Thickness Burn w/o Skin Graft or Inhal Inj w/o cc or Sig Trauma
510	22	M	Non-Extensive Burns w cc or Significant Trauma
511	22	M	Non-Extensive Burns w/o cc or Significant Trauma
512		Р	Simultaneous Pancreas/Kidney Transplant
513		Р	Pancreas Transplant
514	05	Р	Cardiac Defibrillator Implant w Cardiac Catheterization
515	05	Р	Cardiac Defibrillator Implant w/o Cardiac Catheterization
516	05	Р	Percutaneous Cardiovascular Procedures w AMI
517	05	Р	Percutaneous Cardiovascular Procedures w Avvii Percutaneous Cardiovascular Procedures w Coronary Artery Stent w/o AMI
517	05		
		Р	Percutaneous Cardiovascular Procedures w/o Coronary Stent or AMI
519	08	Р	Cervical Spinal Fusion w cc
520	80	Р	Cervical Spinal Fusion w/o cc

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DIAGNOSIS RELATED GROUPS (DRGs) for 2002

DRG Grouper Version 19.0

		wea/	
DRG	MDC	Surg	Description
521	20	Р	Alcohol/Drug Abuse or Dependence w cc
522	20	Р	Alcohol/Drug Abuse or Dependence w Rehab Therapy w/o cc
523	20	Р	Alcohol/Drug Abuse or Dependence w/o Rehab Therapy w/o cc

NOTES

DRGs:

First, the major diagnostic category (MDC) is assigned based on the principal diagnosis. Then, the record is assigned to one of the diagnosis related groups (DRG) within that MDC.

Pre MDC DRGs:

For the five DRGs listed below, the DRG is assigned first, <u>based on any procedure for liver transplant</u>, <u>bone marrow transplant</u>, <u>tracheostomy</u>, <u>or lung transplant</u>, then it is assigned an MDC based on principal diagnosis:

480 - Liver Transplant

481 - Bone Marrow Transplant

482 - Tracheostomy for Face, Mouth & Neck Diagnoses

483 - Tracheostomy Except for Face, Mouth & Neck Diagnoses

495 - Lung Transplant

Unrelated DRGs:

The current version of the Grouper has four DRGs (468, 470, 476, and 477) whose patients may be assigned to a variety of MDCs, based on the principal diagnosis. Patients are assigned to DRGs 468, 476 or 477 when all procedures performed are unrelated to the principal diagnosis. Some patients in DRG 470 are not assigned by the Grouper to any MDC; their MDC is shown as 00 (Ungroupable). Records fall in DRG 470 because the information on the record is considered inconsistent or invalid by the Grouper's algorithm.

CC:

Complications or **Comorbidities**. A **comorbidity** is a pre-existing condition which, because of its presence with a specific principal diagnosis, affects the treatment received, and/or length of stay by at least one day in 75% of the cases, and therefore affects the DRG assignment. A **complication** is a condition that develops following treatment and may affect the treatment received and/or may affect the length of stay by at least one day in at least 75% of the cases, and therefore affects the DRG assignment.

The Health Care Financing Administration (HCFA) developed five principles for complication and comorbidity:

- 1 Chronic and acute manifestations of the same condition should not be considered CCs for one another.
- 2 Specific and nonspecific diagnosis codes for a condition should not be considered CCs for one another.
- 3 Conditions that may not coexist, such as partial/total, unilateral/bilateral, obstructed/unobstructed, and benign/malignant should not be considered CCs for one another.
- 4 The same condition in anatomically proximal sites, such as congenital/acquired, should not be considered CCs for one another.
- 5 Closely related conditions, such as symptoms to the related condition (e.g., dysuria and urinary tract infection), should not be considered CCs for one another.

Med/Surg

P = Procedural (surgical)

codes:

M = Medical

Source:

DRGs: Diagnostic Related Groups Definitions Manual, Version 19.0, effective 10/1/01, Developed for the federal Health Care Financing Administration by 3M® Health Information Systems, New Haven CT 06511

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ID#	Hospital	Affected Fields	Affected Time Period	Facility Comments		
370652	Alvarado Hospital Medical Center	Expected Source of Payment	7/1/2002 - 12/31/2002	Facility states that they are having a mapping problem. The mapping problem is too large to fix for the July-December 2002 period. They will work to get the problem solved for the Jan-June 2003 report period.		
	Alicens de Dedecces la effecte	Type of Care	1/1/2001 - 9/30/2002	Staff incorrectly reporting patients in the wrong type of care. Staff is being trained to utilize Principal Diagnosis to determine chem dep vs psych type of care.		
370749	Alvarado Parkway Institute B.H.S.	Disposition Of Patient	1/1/2002 - 6/30/2002	Residential Facility (Code 8) were being reported as Other (Code 13).		
	Б.П.Э.	Other Diagnoses Condition Present at Admission	1/1/2002 - 11/30/2002	It is very rare for a condition not to be present at time of admission.		
560468	Anacapa Hospital	Total Charges	1/1/2001 - 3/8/2002	Hospital closed 03/08/2002. No staff available to make corrections.		
		Expected Source of Payment				
		T		Average Percentage of Principal Procedures decreased more than 5 percentage points, based on facility's historical data. Facility		
364231	Arrowhead Regional Medical Center	Principal Procedure	1/1/2002 - 12/31/2002	Average Federlage of Finicipal Procedures decreased into that 3 percentage points, based of facility's historical data. If a cliny states that fewer Principal Procedures reported may be due to converting to new tracking software; 62 outpatients that were converted to inpatients but the procedures were not included on the inpatient record; and they had an increase in outpatient day surgeries, which could have resulted in fewer inpatient principal procedures.		
						
560203	Aurora Vista Del Mar Hospital	Race	1/1/2002 - 12/31/2002	Data in this data element was incorrectly collected.		
						
361105	Barstow Community Hospital	Prehospital Care and Resuscitation	1/1/2001 - 6/30/2002	Data not mapped correctly (100% No).		
	0.31					
190170	Children's Hospital of Los Angeles	Expected Source of Payment	7/1/2001 - 6/30/2002	The data not captured accurately.		
		Course of Adminaion				
		Source of Admission Race	1/1/2001 - 12/31/2002	Facility has mapping problems.		
		Type of Admission		. domy nee mapping production.		
004050		Expected Source of Payment				
301258	Coastal Communities Hospital	Name of Plan	1/1/2001 - 6/30/2002	Facility used plan code 8000 as default.		
		Prehospital Care and				
		Resuscitation	1/1/2001 - 12/31/2002	Facility not able to submit data below OSHPD established Error Tolerance Levels by the time of report period closing.		
		Expected Source of Payment				
		O4 Di O di4				
301155	College Hospital Costa Mesa	Other Diagnoses Condition Present at Admission	1/1/2001 - 6/30/2002	Facility started using a new system for 2001 data which had been defaulting to Uncertain.		
			· I			
361458	Colorado River Medical Center	Expected Source of Payment	1/1/2002 - 12/31/2002	The mapping for Expected Source of Payment was incorrect during the January 1 through June 30, 2001 reporting period.		
	Community Dahanianal Haalii	Expected Source of Payment	1/1/2001 - 6/30/2002	Facility confirms that their software program is not allowing for Managed Care to be reported.		
104008	Community Behavioral Health Center	Source of Admission Site		Facility software had been defaulting data in SOA to Home.		
	Center	Expected Source of Payment	7/1/2002 - 11/30/2002	Facility closed. Their computer system limited the options within Expected Source of Payment.		
				Facility states that they are aware of the requirement to collect ethnicity data when a patient is interviewed at registration.		
430743	Community Hospital of Los Gatos	Race	1/1/2001 - 12/31/2002	Sometimes this requirement is impossible since some patients don't know what category they fit into. More training is being provided for staff to improve the collection of race data.		
				The same of the sa		
560473	Community MEM Hosp - San Buenaventura	Race	7/1/2001 - 12/31/2002	Facility states that they are not capturing Race: Ethnicity accurately. Will correct no later than Jan 2003.		

ID#	Hospital	Affected Fields	Affected Time Period	Facility Comments
	Del Amo Hospital	Other Diagnoses Condition Present at Admission	1/1/2002 - 12/31/2002	Facility states that a new system that was implemented caused discrepancies with several data elements due to the limited
190232		Race		options available.
		Source of Admission		
264144	Depart Valley Hespital	Other Diagnoses Condition	1/1/2002 - 9/25/2002	Data was comprised when facility converted to a new software. The Other Condition Present at Admission information did not
304144	Desert Valley Hospital	Present at Admission Race	1/1/2002 - 9/25/2002	convert over. Data was comprised when facility converted to a new software. The Race information did not convert over.
		Expected Source of Payment		E 37 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10805	Eden Medical Center	Source of Admission Type of Admission	1/1/2002 - 6/30/2002	Facility not able to submit data below OSHPD established Error Tolerance Levels by the time of report period closing. All data in each element in question.
0.4000			T4/4/0004 40/04/0000	
94002	El Dorado County-PHF	Other Diagnoses	1/1/2001 - 12/31/2002	Facility missing/under-reporting other dx. Due to time and staffing considerations, they are unable to correct.
190685	Elastar Community Hospital	Expected Source of Payment Name of Plan		Facility at 39.82% plan code # 8000. Unable to correct.
		Type of Admission	1/1/2002 - 12/31/2002	Mapping error at the facility.
420483	Goleta Valley Cottage Hospital	Expected Source of Payment	1/1/2001 - 6/30/2002	Facility acknowledges that they are non-compliant within ESOP. They are not able to thoroughly research the errors and correct them at this time.
301132	Kaiser Fdn Hosp - Anaheim	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
196035	Kaiser Fdn Hosp - Baldwin Park	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190430	Kaiser Fdn Hosp - Bellflower	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
364110	Kaiser Fdn Hosp - Chemical Dep Program	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
361223	Kaiser Fdn Hosp - Fontana	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
14132	Kaiser Fdn Hosp - Fremont	Total Charges	9/23/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
104062	Kaiser Fdn Hosp - Fresno	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
380857	Kaiser Fdn Hosp - GEARY (S.F.)	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190431	Kaiser Fdn Hosp - Harbor City	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
10858	Kaiser Fdn Hosp - Hayward	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190646	Kaiser Fdn Hosp - Mental Health Center	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).

ID#	Hospital	Affected Fields	Affected Time Period	Facility Comments
10856	Kaiser Fdn Hosp - Oakland Campus	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190432	Kaiser Fdn Hosp - Panorama City	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
410804	Kaiser Fdn Hosp - Redwood City	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
480989	Kaiser Fdn Hosp - Rehab Ctr Vallejo	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
74093	Kaiser Fdn Hosp - Richmond	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
334025	Kaiser Fdn Hosp - Riverside	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
340913	Kaiser Fdn Hosp - Sacramento	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
370730	Kaiser Fdn Hosp - San Diego	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
210992	Kaiser Fdn Hosp - San Rafael	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
430805	Kaiser Fdn Hosp - Santa Clara	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
494019	Kaiser Fdn Hosp - Santa Rosa	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
431506	Kaiser Fdn Hosp - Santa Teresa Comm Hosp	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
342344	Kaiser Fdn Hosp - South Sacramento	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
410806	Kaiser Fdn Hosp - South San Francisco	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190429	Kaiser Fdn Hosp - Sunset	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
314024	Kaiser Fdn Hosp - Valley Medical Center	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
70990	Kaiser Fdn Hosp - Walnut Creek	Total Charges	1/1/2002 - 12/31/2002	Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
190434	Kaiser Fdn Hosp - West LA	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).
191450	Kaiser Fdn Hosp - Woodland Hills	Total Charges		Approved Modification to exclude all total charges (Jan - Dec) because only a small percentage of patients were not capitated Kaiser members (who incur no additional charge as inpatients).

ID#	Hospital	Affected Fields	Affected Time Period	Facility Comments
361274	Kindred Hospital Ontario	Race (Race Portion Only)	1/1/2001 - 6/30/2002	Facility confirmed that the form used by their case managers for collecting data prior to admission does not have a space for designating race, nor was it captured from the face sheet of the referring facility. Sometimes this information was collected during their evaluation, sometimes it was not and was later entered by admitting staff as a follow-up. Facility has identified Race-Unknown as a needed area for improvement and have added the data element to the form.
		In 1.10 (D)	T	Is an a later to the second of
		Expected Source of Payment Principal E-Code	ŀ	Facility not able to submit data below OSHPD established Error Tolerance Levels by the time of report period closing. All data in elements in question.
190455	Lancaster Community Hospital	Total Number of Discharges	1/1/2002 - 6/30/2002	·
		Type of Admission		Missing 01/01/02 - 03/15/02 discharges. Facility unable to provide missing records by the time of report period closing.
	I	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	l .	
190854	Los Angeles Metropolitan	Other Diagnoses Condition	1/1/2001 - 12/31/2002	Facility states that their 100% Other Condition: Yes is caused due to their system not allowing for the data to be reported
190034	Medical Center	Present at Admission	17172001 - 1270172002	accurately.
		Other Diagnoses Condition	Γ	Errors in this data element over catabilished error telerance levels. New computer coffuers and staffer issues at the facility have
		Other Diagnoses Condition Present at Admission		Errors in this data element over established error tolerance levels. New computer software and staffing issues at the facility have made corrections to identified errors impossible.
450936	Mayers Memorial Hospital		7/1/2001 - 12/31/2003	Errors in this data element over established error tolerance levels. New computer software and staffing issues at the facility have
		Type of Admission		made corrections to identified errors impossible.
	L	—	I =	
414018	Menlo Park Surgical Hospital	Race	7/1/2002 - 6/30/2003	Facility states that their Admitting Department is not asking for Race.
		Expected Source of Payment		Facility having mapping problems with ESOP data element.
190534	Midway Hospital Medical Center	Source of Admission	1/1/2002 - 12/31/2002	Mapping problems at the facility. Some SNF discharges should have been Residential Care.
	<u> </u>	Course of Admission		inapping problems at the facility. Come one discussing a stocial nave occurrence and the facility.
400504	Mission Community Hospital -	On the of Admin size		Hospital states that due to the large number of records involved (732 of 2442) and time constraints, they are unable to correct.
190524	Panorama	Source of Admission		The problem seems to be centered Source of Admission Site Acute Inpatient Care possibly being over reported. Licensure of Site also may be over reported. There is a high probablity of the rest of the data element incorrect.
		Expected Source of Payment		
		Other Diagnoses Condition	1/1/2001 - 12/31/2002	
		Present at Admission		
		Principal Diagnosis Condition Present at Admission		Per facility - data in error due to hospital oversight.
361266	Mountains Community Hospital	Source of Admission		
		Other Procedure(s)		
		Prehospital Care and	†	
		Resuscitation		
		Race		
	Pagional Madical Contar of San	T	I	
430705	Regional Medical Center of San Jose	Disposition Of Patient	7/1/2001 - 6/30/2002	Mapping problems with the Patient Disposition caused by new computer system at the facility.
74017	San Ramon Regional Medical	Expected Source of Payment Type	1/1/2002 - 6/30/2002	Type of Coverage data in question.
17017	Center	of Coverage	1/2002 0/00/2002	1.750 or obtaining data in question.
-	Conto Ano Hoorital Martinal	Г	T	
301314	Santa Ana Hospital Medical Center	Expected Source of Payment	1/1/2001 - 12/31/2002	Facility states that they are missing Private/HMO and are unable to identify which category they could be in.
	Ocinici	<u> </u>	<u> </u>	
100-			4/4/0004 0/00/00==	
420514	Santa Barbara Cottage Hospital	Expected Source of Payment	1/1/2001 - 6/30/2002	Per analyst/facility - hospital contact not able to research these errors at this time.
			T	Per facility - the data is incorrect. Admitting staff was chosing the race/ethnicity for their patients and NOT having them self-
190691	Santa Teresita Hospital	Race	7/1/2002 - 6/30/2003	declare.
	l .	l	!	NOOM 0.

ID#		4.5				
ID#	Hospital	Affected Fields	Affected Time Period	Facility Comments		
420522	Santa Ynez Valley Cottage	Expected Source of Payment	1/1/2001 - 6/30/2002	Per facility and analyst - contact not able to research and correct information.		
	Hospital	Other Diagnoses Condition Present		Per facility/analyst - contact not able to research and correct information.		
	Ia	To	7///0004 40/04/0000			
410817	Seton Medical Center	Source of Admission Route	7/1/2001 - 12/31/2002	A mapping problem within "Admission Source-Route" caused errors. The problem was corrected late in 2002.		
	T	1		Annual Malfadia Daniel fath faill and the fail and the fail and the fath and the fa		
344114	Shriners Hospital - Northern	Total Charges		Approved a Modification Request for the facility to report total charges as \$0 rather that \$1 for the 2002 reporting periods. This is in keeping with the type of service that Shriners supplies in that services rendered are not charged for. ("No Charge" is reported		
344114	Calif	Total Charges		as "1" for all other facilities.)		
				as 1 for all other radinates.)		
342302	Sierra Vista Hospital	Principal Procedure	7/1/2002 - 12/31/2002	Facility agrees to start reporting drug therapy procedure codes effective with Jan-June 2003 data.		
OILOOL	Cicira Victa Ficopital	i inopai i roccare		r dome discourse state reporting and another procedure seeded shround wan out a state 2000 data.		
		Admission Date				
		Expected Source of Payment				
		Disposition Of Patient	•			
		Discharge Date	•			
		Date of Birth	•			
		Other Diagnoses				
		Principal Procedure				
		Principal E-Code	•			
		Principal Diagnosis Condition				
		Present at Admission				
		Principal Diagnosis				
		Prehospital Care and				
100750	St. Luke Medical Center	Resuscitation	1/1/2001 - 6/30/2002	Facility closed. Staff not available to make corrections.		
190759	St. Luke Medical Certier	Other Procedure(s)				
		Other Procedure Date(s)				
		Other E-Code(s)				
		Other Diagnoses Condition				
		Present at Admission				
		ZIP Code				
		Type of Care				
		Type of Admission				
		Total Charges				
		Source of Admission	i			
		Social Security Number	•			
		Race	:			
		Principal Procedure Date		<u>L</u>		
<u></u>	T	In: w orn :				
		Disposition Of Patient		Facility having mapping and computer problems. Unable to correct for the 7 to 12 2002 reporting period.		
484028	Telecare Solano - P.H.F.	Source of Admission	7/1/2002 - 12/31/2002			
		Principal Procedure		Facility had computer programming problems within the 7 to 12 reporting period and Principal Procedures did not get entirely		
	<u> </u>	1		brought over when problem corrected.		
	Torrance Memorial Medical					
190422	Center	Expected Source of Payment	1/1/2002 - 6/30/2002	Facility having mapping problems with ESOP data element.		
		1				
				For the state of t		
540046	Tularo District Hospital	Exported Source of Doument		Facility states that they have experienced interfacing problems affecting Private Coverage payer incorrectly reported with		
340816	Tulare District Hospital	Expected Source of Payment		Managed Care Other instead of Traditional type of coverage during the periods July-December 2002 and first half 2003. Due to the lack of staff, they will not be able to correct the issue. They are currently working on resolving the issue.		
				and later of start, they will not be able to confect the issue. They are currently working on resolving the issue.		

APPENDIX E

1999 - 2002 Managed Care - Knox-Keene/MCOHS

0000 0176 0328 0303	Plan Code not applicable
0328	
	Aetna Health Plans of California, Inc.
0303	Alameda Alliance for Health
0000	Blue Cross of California
0043	Blue Shield of California
0314	BPS HMO
0352	Brown and Toland Medical Group
0365	Calaveras Provider Network
0326	Care 1st Health Plan
0366	Cedars-Sinai Provider Plan, LLC
0234	Careamerica-Southern California, Inc.
0278	Chinese Community Health Plan
0152	Cigna Healthcare of California, Inc.
0200	Community Health Group
0248	Community Health Plan (County of Los Angeles)
0360	Concentrated Care, Inc.
0054	Contra Costa Health Plan
0350	FPA Medical Management of California, Inc
0327	Great American Health Plan
0317	Greater Pacific HMO Inc
0292	HAI, Hai-Ca
0277	Healthmax America
0300	Health Net
0126	Health Plan of America (HPA)
0159	Health Plan of the Redwoods
0358	Health Plan of San Mateo Health Families, not COHS
0357	Heritage Provider Network, Inc.
0231	Holman Professional Counseling Centers
0346	Inland Empire Health Plan
0151	Inter Valley Health Plan
0289	Kaiser Foundation Added Choice Health Plan
0055	Kaiser Foundation Health Plan, Inc.
0335	Kern Health Systems Inc
0343	Key Health Plan of California
0343	Key HMO Key Choice
0142	Lifeguard, Inc.
0355	LA Care Health Plan
0196	Managed Health Network
0002	Maxicare
0298	MCC Behavioral Care of California, Inc.
0345	MedPartners Provider Network, Inc.
0266	Metrahealth Care Plan
0288	Merit Behavioral Care of California, Inc.
0322	Molina
0270	Monarch Plan Inc.
0222	National Health Plans National HMO
0222	
0235	Occupational Health Services (OHS)
0238	Omni Healthcare, Inc.
0325	One Health Plan of California Inc.
0301 0126	Pacificare Behavioral Health of California Inc. Pacificare of California

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1999 - 2002 Managed Care - Knox-Keene/MCOHS

0367	Primecare Medical Network, Inc. A CA. Corp.
0237	Priorityplus of California
0296	Prucare Plus
0300	Qualmed Plans for Health
0354	Regents of the University of California
0349	San Francisco Health Plan
0351	Santa Clara County Family Health Plan
0377	Scripps Clinic Health Plan Services, Inc.
0126	Secure Horizons
0310	Sharp Health Plan
0393	Simnsa Healthcare
0393	Sistemas Medicos Nacionales, S.A. De C.V.
0212	Smartcare Health Plan
0338	The Health Plan of San Joaquin
0363	Thipa Management Consultants, Incorporated
0324	Tower Health Service
0266	UHC Healthcare
8000	UHP Healthcare
0209	Universal Care
0236	Valley Health Plan
0293	Value Behavioral Health of California, Inc.
0344	Ventura County Health Care Plan
0102	Vista Behavioral Health Plan
0348	Western Health Advantage
8000	Other HMO

Table 2. Medi-Cal County Organized Health Systems and Plan Code Numbers				
Plan Code Numbers	Name of Medi-Cal County Organized Health System			
0000	Plan Code not applicable			
9030	Cal Optima (Orange County)			
9044	Central Coast Alliance for Health (Santa Cruz County)			
9041	Health Plan of San Mateo (San Mateo County)			
9042	Santa Barbara Health Authority (Santa Barbara County)			
9048	Solano Partnership Health Plan (Solano County)			

Related Plans: If the **plan code numbers** are the **same** and the **plan names** are **different**, it means they belong to same "parent" plan.

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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST Calendar Year, 2002

OSHPD ID NO.	NUMBER FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
100:5	ALAMEDA COUNTY MEDICAL CENTERS	0.4055	4/4/00 40/01/2025	10.555
	ALAMEDA COUNTY MEDICAL CENTERS		1/1/02 - 12/31/2002	13,897
	ALAMEDA HOSPITAL		1/1/02 - 12/31/2002	3,062
	ALHAMBRA HOSPITAL		1/1/02 - 12/31/2002	4,220
	ALTA BATES SUMMIT MED CTR - HERRICK CAMPUS		1/1/02 - 12/31/2002	3,649
	ALTA BATES SUMMIT MEDICAL CENTERS. CARLANG		1/1/02 - 12/31/2002	26,323
	ALTA BATES SUMMIT MEDICAL CENTERS - OAKLAND ALVARADO HOSPITAL MEDICAL CENTERS		1/1/02 - 12/31/2002 1/1/02 - 12/31/2002	22,371 10,889
	ALVARADO HOSPITAL MEDICAL CENTERS ALVARADO PARKWAY INSTITUTE B.H.S.		1/1/02 - 12/31/2002	1,842
	ALVARADO FARRWAT INSTITUTE B.H.S. AMERICAN RECOVERY CENTER		1/1/02 - 12/31/2002	1,642
	ANACAPA HOSPITAL		1/1/02 - 12/31/2002	215
	ANAHEIM GENERAL HOSPITALS		1/1/02 - 12/31/2002	4,133
	ANAHEIM MEMORIAL MEDICAL CENTERS		1/1/02 - 12/31/2002	15,861
	ANTELOPE VALLEY HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	25,632
	ARROWHEAD REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	21,205
	ARROYO GRANDE COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	3,118
	AURORA CHARTER OAK		1/1/02 - 12/31/2002	4,041
	AURORA SAN DIEGO		1/1/02 - 12/31/2002	2,632
	AURORA VISTA DEL MAR HOSPITAL		1/1/02 - 12/31/2002	2,254
	AVALON MUNICIPAL HOSPITAL		1/1/02 - 12/31/2002	108
	BAKERSFIELD HEART HOSPITAL		1/1/02 - 12/31/2002	2,575
154044	BAKERSFIELD MEMORIAL HOSPITAL - WHITE LANE		1/1/02 - 12/31/2002	1,210
	BAKERSFIELD MEMORIAL HOSPITAL- 34TH STREET		1/1/02 - 12/31/2002	17,191
190052	BARLOW RESPIRATORY HOSPITAL	90026	1/1/02 - 12/31/2002	476
361105	BARSTOW COMMUNITY HOSPITAL	92311	1/1/02 - 12/31/2002	3,324
90793	BARTON MEMORIAL HOSPITAL	96150	1/1/02 - 12/31/2002	4,431
361110	BEAR VALLEY COMMUNITY HOSPITAL	92315	1/1/02 - 12/31/2002	234
190066	BELLFLOWER MEDICAL CENTER	90706	1/1/02 - 12/31/2002	7,104
330120	BETTY FORD CENTER AT EISENHOWER, THE	92270	1/1/02 - 12/31/2002	956
	BEVERLY HOSPITAL		1/1/02 - 12/31/2002	12,842
	BHC ALHAMBRA HOSPITAL		1/1/02 - 12/31/2002	2,749
	BIGGS GRIDLEY MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	1,000
	BREA COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	2,547
	BROTMAN MEDICAL CENTER		1/1/02 - 12/31/2002	8,979
	BUTTE COUNTY PHF		1/1/02 - 12/31/2002	1,288
	CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANG		1/1/02 - 12/31/2002	15,879
	CALIFORNIA PACIFIC MEDICAL CENTERS		1/1/02 - 12/31/2002	34,378
	CALIFORNIA SPECIALTY HOSPITAL		1/1/02 - 12/31/2002	2,227
	CANYON RIDGE HOSPITAL		1/1/02 - 12/31/2002	3,406
	CASA COLINA HOSPITAL FOR REHAB MEDICINE		1/1/02 - 12/31/2002	840
	CEDAR VISTA HOSPITAL		1/1/02 - 12/31/2002	2,032
	CEDARS SINAI MEDICAL CENTER		1/1/02 - 12/31/2002	51,897
	CENTINELA HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	16,783
	CENTRAL VALLEY GENERAL HOSPITAL CENTURY CITY HOSPITAL		1/1/02 - 12/31/2002 1/1/02 - 12/31/2002	5,686 5,477
	CHAPMAN MEDICAL CENTER		1/1/02 - 12/31/2002	5,477 3,042
	CHAPMAN MEDICAL CENTER CHILDREN'S HOSPITAL - SAN DIEGO		1/1/02 - 12/31/2002	13,199
	CHILDREN'S HOSPITAL - SAN DIEGO CHILDREN'S HOSPITAL AND RESEARCH CTR AT OAK		1/1/02 - 12/31/2002	9,575
	CHILDREN'S HOSPITAL AND RESEARCH CTR AT OAR		1/1/02 - 12/31/2002	1,923
	CHILDREN'S HOSPITAL CENTRAL CALIFORNIA		1/1/02 - 12/31/2002	11,373
	CHILDREN'S HOSPITAL OF LOS ANGELES		1/1/02 - 12/31/2002	11,916
	CHILDREN'S HOSPITAL OF ORANGE COUNTY		1/1/02 - 12/31/2002	8,569
33000E	55	5_000		5,555

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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST

Calendar	Year,	2002
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434051 CHILDRENS RECOVERY CENTER OF NORTHERN CAI 382715 CHINESE HOSPITAL 382715 CHINESE HOSPITAL 38131 1/102 - 12/31/2002 31382715 CHINESE HOSPITAL 38131 1/102 - 12/31/2002 31142 CHIND VALLEY MEDICAL CENTER 31710 1/102 - 12/31/2002 71190413 CITRUS VALLEY MEDICAL CENTER - IC CAMPUS 190636 CITRUS VALLEY MEDICAL CENTER - OV CAMPUS 190636 CITRUS VALLEY MEDICAL CENTER - OV CAMPUS 190636 CITRUS VALLEY MEDICAL CENTER - OV CAMPUS 190661 CITY OF ANGELS MEDICAL CENTER - OV CAMPUS 190410 CITY OF ANGELS MEDICAL CENTER - OV CAMPUS 190410 CITY OF ANGELS MEDICAL CENTER - OV CAMPUS 190410 CITY OF HOPE NATIONAL MEDICAL CENTER 190176 CITY OF HOPE NATIONAL MEDICAL CENTER 190176 CITY OF HOPE NATIONAL MEDICAL CENTER 190176 COAST PLAZA DOCTORS HOSPITAL 190766 COAST PLAZA DOCTORS HOSPITAL 190767 COLLEGE HOSPITAL OSTA MESA 361458 COLLEGE HOSPITAL OSTA MESA 361468 COLORADO RIVER MEDICAL CENTER 29263 1/1/02 - 12/31/2002 2, 326 60870 COLUSA REGIONAL MEDICAL CENTER 29383 1/1/02 - 12/31/2002 2, 326 60870 COLUSA REGIONAL MEDICAL CENTER 29383 1/1/02 - 12/31/2002 1, 376 190196 COMMUNITY HOSPITAL OF LONG BEACH 190197 COMMUNITY HOSPITAL OF LONG BEACH 190197 COMMUNITY HOSPITAL OF LONG BEACH 190198 COMMUNITY HOSPITAL OF LONG BEACH 190198 COMMUNITY MEDICAL CENTER - SOBOOD 1/1/02 - 12/31/2002 1, 376 190760 COMMUNITY MEDICAL CENTER - SOBOOD 1/1/02 - 12/31/2002 1, 376 190760 COMMUNITY MEDICAL CENTER - SOBOOD 1/1/02 - 12/31/2002 1, 376 190240 CONTINENTAL REHABILITATION HOSPITAL OF SAN E SOBOOD 1/1/02 - 12/31/2002 1, 386 190250 DANIEL FREEMAN MARINA HOSPITAL 190500 DANIEL FREEMAN MARINA HOSPITAL 190500 DANIEL FREEMAN MEMORI					
382715 CHINESE HOSPITAL 94133 1/1/02 - 12/31/2002 2,030 361144 CHINO VALLEY MEDICAL CENTER 91710 1/1/02 - 12/31/2002 7,119 200692 CHOWCHILLA DISTRICT MEMORIAL HOSPITAL 93610 1/1/02 - 12/31/2002 7,119 1/1004 1/1/02 - 12/31/2002 7,119 1/1004 1/1/02 1/1/31/2002 7,119 1/1004 1/1/02 1/1/31/2002 1/1/02 1/1/02 1/1/31/2002 1/1/02					
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190661 CITY OF ANGELS MEDICAL CENTER-DOWNTOWN CA 90026					
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190176 CITY OF HOPE NATIONAL MEDICAL CENTER 91010 1/1/02 - 12/31/2002 6.36 100697 COALINGA REGIONAL MEDICAL CENTER 93210 1/1/02 - 12/31/2002 5.495 301258 COASTAL COMMUNITIES HOSPITAL 90650 1/1/02 - 12/31/2002 7.840 100184 COLLEGE HOSPITAL 90701 1/1/02 - 12/31/2002 7.840 100185 COLLEGE HOSPITAL 90701 1/1/02 - 12/31/2002 7.840 100185 COLLEGE HOSPITAL COSTA MESA 92627 1/1/02 - 12/31/2002 4.887 361458 COLORADO RIVER MEDICAL CENTER 92363 1/1/02 - 12/31/2002 2.326 60870 COLUSA REGIONAL MEDICAL CENTER 95932 1/1/02 - 12/31/2002 7.795 7.001977 COMMUNITY & MISSION HOSPS OF HNTG PK 90255 1/1/02 - 12/31/2002 7.795 7.001977 COMMUNITY HOSPITAL OF LONG BEACH 90041 1/1/02 - 12/31/2002 13,716 190196 COMMUNITY HOSPITAL OF LONG BEACH 90041 1/1/02 - 12/31/2002 1,910 430743 COMMUNITY HOSPITAL OF LONG BEACH 90804 1/1/02 - 12/31/2002 1,910 430743 COMMUNITY HOSPITAL OF LONG BEACH 90804 1/1/02 - 12/31/2002 1,910 430743 COMMUNITY HOSPITAL OF LONG BEACH 90804 1/1/02 - 12/31/2002 1,910 430743 COMMUNITY MEDICAL CENTER - CLOVIS 93612 1/1/02 - 12/31/2002 13,480 100055 COMMUNITY MEDICAL CENTER - FRESNO 93721 1/1/02 - 12/31/2002 13,480 100075 COMMUNITY MEDICAL CENTER - FRESNO 93721 1/1/02 - 12/31/2002 17,399 374094 CONTINIENTAL REHABILITATION HOSPITAL 93031 1/1/02 - 12/31/2002 17,399 374094 CONTINIENTAL REHABILITATION HOSPITAL 93210 1/1/02 - 12/31/2002 17,399 374094 CONTINIENTAL REHABILITATION HOSPITAL 93210 1/1/02 - 12/31/2002 17,399 374094 CONTINIENTAL REHABILITATION HOSPITAL 93210 1/1/02 - 12/31/2002 17,399 374094 CONTINIENTAL REHABILITATION HOSPITAL 93210 1/1/02 - 12/31/2002 17,399 374094 CONTINENTAL REHABILITATION HOSPITAL 93210 1/1/02 - 12/31/2002 17,399 374094 CONTRIBER 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050 407050					
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196168 EARL & LORRAINE MILLER CHILDRENS HOSPITAL 90806 1/1/02 - 12/31/2002 7.477					
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190256 EAST LOS ANGELES DOCTORS HOSPITAL 90023 1/1/02 - 12/31/2002 4,188					
190328 EAST VALLEY HOSPITAL MEDICAL CENTER 91740 1/1/02 - 12/31/2002 3,901					
320859 EASTERN PLUMAS HEALTH CARE 96122 1/1/02 - 12/31/2002 527					
10805 EDEN MEDICAL CENTER 94546 1/1/02 - 12/31/2002 10,799					
331168 EISENHOWER MEMORIAL HOSPITAL 92270 1/1/02 - 12/31/2002 17,565					
430763 EL CAMINO HOSPITAL 94040 1/1/02 - 12/31/2002 21,222					
130699 EL CENTRO REGIONAL MEDICAL CENTER 92243 1/1/02 - 12/31/2002 7,560	130699	EL CENTRO REGIONAL MEDICAL CENTER	92243	1/1/02 - 12/31/2002	7,560

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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST

Calendar Year, 2002

SHPD NUMBER ZIP REPORT TOTAL	OCUPP	NUMBER	710	BERORE	TOTAL
94002 EL DORADO COUNTY P H F 190685 ELASTAR COMMUNITY HOSPITAL 190685 ELASTAR COMMUNITY HOSPITAL 90022 1/102 - 12/31/2002 3,860 500867 EMANUEL MEDICAL CENTER, INC 9380 1/102 - 12/31/2002 3,820 190280 ENCINO-TARZANA REGIONAL MED CTR-ENCINO 94380 1/102 - 12/31/2002 3,829 190517 ENCINIO-TARZANA REGIONAL MED CTR-ENCINO 94380 1/102 - 12/31/2002 16,089 40962 ENLOE MEDICAL CENTERS 95926 1/102 - 12/31/2002 17,054 474007 FAIRCHILD MEDICAL CENTER 90097 1/102 - 12/31/2002 2,026 370705 FALLBROOK HOSPITAL DISTRICT 9028 1/102 - 12/31/2002 3,075 40875 FEATHER RIVER HOSPITAL 95969 1/102 - 12/31/2002 3,075 40875 FEATHER RIVER HOSPITAL 90288 FOOTHILL PRESBYTERIAN HOSPITAL-JOHNSTON ME 97141 1/102 - 12/31/2002 21,512 230949 FRANK R HOWARD MEMORIAL HOSPITAL 95490 1/102 - 12/31/2002 21,512 230949 FRANK R HOWARD MEMORIAL HOSPITAL 95490 1/102 - 12/31/2002 21,512 230949 FRENON THOSPITAL 95490 1/102 - 12/31/2002 21,514 04047 FRENOCH HOSPITAL 95490 1/102 - 12/31/2002 21,514 04047 FRESNO COUNTY PSYCHIATRIC HEALTH FACILITY 9710 1/102 - 12/31/2002 2,026 301283 GARDEN GROVE HOSPITAL & MEDICAL CENTER 9710 1/102 - 12/31/2002 2,070 301283 GARDEN GROVE HOSPITAL & MEDICAL CENTER 9710 1/102 - 12/31/2002 2,070 301283 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 2,070 301283 GARDEN GROVE HOSPITAL & MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 190315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 190315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 190315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 9710 1/102 - 12/31/2002 10,983 100315 GARFIELD MEDICAL CENTER 971					
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160725 HANFORD COMMUNITY MEDICAL CENTER 93230 1/1/02 - 12/31/2002 3,883 350784 HAZEL HAWKINS MEMORIAL HOSPITAL 95023 1/1/02 - 12/31/2002 3,226 490964 HEALDSBURG DISTRICT HOSPITAL 95448 1/1/02 - 12/31/2002 619 304159 HEALTHBRIDGE CHILDREN'S REHABILITATION HOSF 92866 1/1/02 - 12/31/2002 65 154022 HEALTHSOUTH BAKERSFIELD REHABILITATION HOSPITAL 93309 1/1/02 - 12/31/2002 1,245 304079 HEALTHSOUTH TUSTIN REHABILITATION HOSPITAL 92680 1/1/02 - 12/31/2002 946 380842 HEBREW HOME FOR THE AGED DISABLED/APH 94112 1/1/02 - 12/31/2002 361 331194 HEMET VALLEY MEDICAL CENTER 92543 1/1/02 - 12/31/2002 17,467 190949 HENRY MAYO NEWHALL MEMORIAL HOSPITAL 91355 1/1/02 - 12/31/2002 11,237 344021 HERITAGE OAKS HOSPITAL 95841 1/1/02 - 12/31/2002 2,553 362041 HI-DESERT MEDICAL CENTER 92252 1/1/02 - 12/31/2002 2,954 301205 HOAG MEMORIAL HOSPITAL PRESBYTERIAN 92663 1/1/02 - 12/31/2002 2,954 301209 HUNTINGTON BEACH HOSPITAL 90028 1/1/02 - 12/31/2002 1,600 190400 HUNTINGTON MEMORIAL HOSPITAL 9105 1/1/02 - 12/31/2002 4,407 190404 HONTINGTON MEMORIAL HOSPITAL 95947 1/1/02 - 12/31/2002 29,808 </td <td>190352 GREATER EL MONTE</td> <td>COMMUNITY HOSPITAL</td> <td>91733</td> <td>1/1/02 - 12/31/2002</td> <td>5,400</td>	190352 GREATER EL MONTE	COMMUNITY HOSPITAL	91733	1/1/02 - 12/31/2002	5,400
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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST

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OSHPD ID NO.	NUMBER FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
	JOHN F KENNEDY MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	11,632
	JOHN MUIR MEDICAL CENTER		1/1/02 - 12/31/2002	20,035
	KAISER FDN HOSPS - HARBOR CITY-CARSON		1/1/02 - 12/31/2002	14,320
	KAISER FND HOSP - ANAHEIM		1/1/02 - 12/31/2002	15,215
	KAISER FND HOSP - BALDWIN PARK		1/1/02 - 12/31/2002	15,182
	KAISER FND HOSP - BELLFLOWER		1/1/02 - 12/31/2002	21,570
	KAISER FND HOSP - FONTANA		1/1/02 - 12/31/2002	25,957
	KAISER FND HOSP - FREMONT		1/1/02 - 12/31/2002	862
	KAISER FND HOSP - FRESNO		1/1/02 - 12/31/2002	9,795
	KAISER FND HOSP - HAYWARD		1/1/02 - 12/31/2002	17,325
	KAISER FND HOSP - MENTAL HEALTH CENTER		1/1/02 - 12/31/2002	2,306
	KAISER FND HOSP - OAKLAND CAMPUS		1/1/02 - 12/31/2002	12,173
	KAISER FND HOSP - PANORAMA CITY		1/1/02 - 12/31/2002	14,648
	KAISER FND HOSP - PERMANENTE CHEM DEP PROG		1/1/02 - 12/31/2002	589
	KAISER FND HOSP - REDWOOD CITY		1/1/02 - 12/31/2002	9,492
	KAISER FND HOSP - REHABILITATION CENTER VALL		1/1/02 - 12/31/2002	18,295
	KAISER FND HOSP - RIVERSIDE		1/1/02 - 12/31/2002	17,902
	KAISER FND HOSP - SACRAMENTO		1/1/02 - 12/31/2002	21,865
	KAISER FND HOSP - SAN DIEGO		1/1/02 - 12/31/2002	31,137
	KAISER FND HOSP - SAN RAFAEL		1/1/02 - 12/31/2002	5,469
	KAISER FND HOSP - SANTA CLARA		1/1/02 - 12/31/2002	20,979
	KAISER FND HOSP - SANTA ROSA		1/1/02 - 12/31/2002	9,280
	KAISER FND HOSP - SANTA TERESA COMMUNITY HO		1/1/02 - 12/31/2002	15,846
	KAISER FND HOSP - SOUTH SACRAMENTO		1/1/02 - 12/31/2002	15,499
	KAISER FND HOSP - SOUTH SAN FRANCISCO		1/1/02 - 12/31/2002	6,121
	KAISER FND HOSP - SUNSET		1/1/02 - 12/31/2002	22,830
	KAISER FND HOSP - VALLEY MEDICAL CENTER		1/1/02 - 12/31/2002	8,410
	KAISER FND HOSP - WEST LA		1/1/02 - 12/31/2002	12,869
	KAISER FND HOSP - WOODLAND HILLS		1/1/02 - 12/31/2002	14,428
	KAISER FNDN HOSP - RICHMOND CAMPUS		1/1/02 - 12/31/2002	2,933
	KAISER FNDN HOSPS - SAN FRANCISCO		1/1/02 - 12/31/2002	15,453
	KAISER FNDN HOSPS - WALNUT CREEK & MARTINEZ		1/1/02 - 12/31/2002	22,530
	KAWEAH DELTA DISTRICT HOSPITAL		1/1/02 - 12/31/2002	23,388
	KEDREN COMMUNITY MENTAL HEALTH CENTER		1/1/02 - 12/31/2002	937
	KENTFIELD REHABILITATION HOSPITAL		1/1/02 - 12/31/2002	475
	KERN MEDICAL CENTER		1/1/02 - 12/31/2002	15,905
	KERN VALLEY HEALTHCARE DISTRICT		1/1/02 - 12/31/2002	1,022
	KINDRED HOSPITAL - LOS ANGELES		1/1/02 - 12/31/2002	418
	KINDRED HOSPITAL - SACRAMENTO		1/1/02 - 12/31/2002	253
	KINDRED HOSPITAL - SAN DIEGO		1/1/02 - 12/31/2002	648
	KINDRED HOSPITAL - SAN FRANCISCO BAY AREA		1/1/02 - 12/31/2002	423
	KINDRED HOSPITAL BREA		1/1/02 - 12/31/2002	363
361274	KINDRED HOSPITAL ONTARIO		1/1/02 - 12/31/2002	626
301380	KINDRED HOSPITAL WESTMINSTER		1/1/02 - 12/31/2002	590
190449	KINDRED HOSPITALS - LA MIRADA, SAN GABRL VAL	90637	1/1/02 - 12/31/2002	2,214
	KINGSBURG MEDICAL CENTER		1/1/02 - 12/31/2002	879
	KNOLLWOOD PSYCHIATRIC & CHEMICAL DEPENDEN		1/1/02 - 12/31/2002	1,155
	LA CASA PSYCHIATRIC HEALTH FACILITY		1/1/02 - 12/31/2002	192
	LA PALMA INTERCOMMUNITY HOSPITAL		1/1/02 - 12/31/2002	5,092
	LAC/RANCHO LOS AMIGOS NATIONAL REHAB CENTE		1/1/02 - 12/31/2002	3,261
	LAGUNA HONDA HOSPITAL & REHABILITATION CENT		1/1/02 - 12/31/2002	1,181
	LAKEWOOD REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	10,741

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OSHPD ID NO.	NUMBER FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
190455	LANCASTER COMMUNITY HOSPITAL	93534	1/1/02 - 12/31/2002	4,854
380868	LANGLEY PORTER PSYCHIATRIC INSTITUTE	94143	1/1/02 - 12/31/2002	781
190462	LAS ENCINAS HOSPITAL	91107	1/1/02 - 12/31/2002	2,165
180919	LASSEN COMMUNITY HOSPITAL INC	96130	1/1/02 - 12/31/2002	1,428
190468	LINCOLN HOSPITAL MEDICAL CENTER	90033	1/1/02 - 12/31/2002	755
190470	LITTLE COMPANY OF MARY HOSPITAL	90503	1/1/02 - 12/31/2002	20,065
190680	LITTLE COMPANY OF MARY HOSPS-SAN PEDRO, TO	90732	1/1/02 - 12/31/2002	8,943
390923	LODI MEMORIAL HOSPITALS	95240	1/1/02 - 12/31/2002	8,260
364014	LOMA LINDA UNIVERSITY BEHAVORIAL MEDICINE CE	92373	1/1/02 - 12/31/2002	4,235
361246	LOMA LINDA UNIVERSITY MEDICAL CENTERS	92354	1/1/02 - 12/31/2002	32,419
420491	LOMPOC HEALTHCARE DISTRICT	93436	1/1/02 - 12/31/2002	3,025
	LONG BEACH MEMORIAL MEDICAL CENTER		1/1/02 - 12/31/2002	34,790
	LOS ALAMITOS MEDICAL CENTER		1/1/02 - 12/31/2002	9,987
	LOS ANGELES CO HARBOR-UCLA MEDICAL CENTER		1/1/02 - 12/31/2002	22,747
191261	LOS ANGELES CO HIGH DESERT HOSPITAL		1/1/02 - 12/31/2002	1,754
	LOS ANGELES CO MARTIN LUTHER KING JR/DREW N		1/1/02 - 12/31/2002	13,891
	LOS ANGELES CO USC MEDICAL CENTER		1/1/02 - 12/31/2002	43,385
	LOS ANGELES COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	4,713
	LOS ANGELES COUNTY OLIVE VIEW-UCLA MEDICAL		1/1/02 - 12/31/2002	14,444
	LOS ANGELES METROPOLITAN MEDICAL CENTERS		1/1/02 - 12/31/2002	7,612
	LOS ROBLES REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	15,348
	LUCILE SALTER PACKARD CHILDREN'S HOSP AT STA		1/1/02 - 12/31/2002	16,039
	MAD RIVER COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	3,300
	MADERA COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	6,126
	MAMMOTH HOSPITAL		1/1/02 - 12/31/2002	751
	MARIAN MEDICAL CENTER		1/1/02 - 12/31/2002	13,691
	MARIE GREEN PSYCHIATRIC CENTER - P H F		1/1/02 - 12/31/2002	808
	MARIN GENERAL HOSPITAL		1/1/02 - 12/31/2002	13,054
	MARK TWAIN ST. JOSEPH'S HOSPITAL		1/1/02 - 12/31/2002	2,219
	MARSHALL HOSPITAL DIVIDE WELLNESS		1/1/02 - 12/31/2002	6,598
	MAYERS MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	706
	MEMORIAL HOSPITAL LOS BANOS		1/1/02 - 12/31/2002	2,368
	MEMORIAL HOSPITAL MEDICAL CENTER - MODESTC		1/1/02 - 12/31/2002	21,620
	MEMORIAL HOSPITAL OF GARDENA		1/1/02 - 12/31/2002	5,486
231013	MENDOCINO COAST DISTRICT HOSPITAL		1/1/02 - 12/31/2002	2,236
	MENIFEE VALLEY MEDICAL CENTER		1/1/02 - 12/31/2002	4,949
	MENLO PARK SURGICAL HOSPITAL		1/1/02 - 12/31/2002	406
	MERCY GENERAL HOSPITAL		1/1/02 - 12/31/2002	19,586
	MERCY HOSPITAL - FOLSOM		1/1/02 - 12/31/2002	5,175
	MERCY HOSPITALS - BAKERSFIELD		1/1/02 - 12/31/2002	12,568
	MERCY MEDICAL CENTER		1/1/02 - 12/31/2002	13,434
	MERCY MEDICAL CENTER MERCED-COMMUNITY CA		1/1/02 - 12/31/2002	6,948
	MERCY MEDICAL CENTER MERCED-DOMINICAN CAN		1/1/02 - 12/31/2002	6,540
	MERCY MEDICAL CENTER MT. SHASTA		1/1/02 - 12/31/2002	1,710
	MERCY SAN JUAN & AMERICAN RIVER HOSPITALS		1/1/02 - 12/31/2002	18,286
	MERCY WESTSIDE HOSPITAL		1/1/02 - 12/31/2002	324
	METHODIST HOSPITAL OF SACRAMENTO		1/1/02 - 12/31/2002	9,587
	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA		1/1/02 - 12/31/2002	15,802
	MIDWAY HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	4,996
	MILLS-PENINSULA MEDICAL CENTERS		1/1/02 - 12/31/2002	18,263
	MISSION COMMUNITY HOSPITALS		1/1/02 - 12/31/2002	4,725
	MISSION HOSPITAL REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	17,625
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OSHPD	NUMBER	ZIP	REPORT	TOTAL
ID NO.	NUMBER FACILITY NAME	CODE	PERIOD	DISCHS
500954	MODESTO REHABILITATION HOSPITAL		1/1/02 - 12/31/2002	1,221
	MODOC MEDICAL CENTER		1/1/02 - 12/31/2002	256
	MONROVIA COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	1,230
	MONTEREY PARK HOSPITAL		1/1/02 - 12/31/2002	9,053
334048	MORENO VALLEY COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	6,218
190552	MOTION PICTURE & TELEVISION HOSPITAL	91364	1/1/02 - 12/31/2002	1,275
361266	MOUNTAINS COMMUNITY HOSPITAL	92352	1/1/02 - 12/31/2002	646
13687	MPI CHEMICAL DEPENDENCY RECOVERY HOSPITAL	94609	1/1/02 - 12/31/2002	492
71018	MT. DIABLO MEDICAL CENTER	94520	1/1/02 - 12/31/2002	9,555
74039	MT. DIABLO MEDICAL PAVILION	94520	1/1/02 - 12/31/2002	2,705
281297	N M HOLDERMAN MEMORIAL HOSPITAL (VET'S HOM	94599	1/1/02 - 12/31/2002	811
274043	NATIVIDAD MEDICAL CENTER - CONSTITUTION BLVE	93906	1/1/02 - 12/31/2002	10,923
301304	NEWPORT BAY HOSPITAL	92663	1/1/02 - 12/31/2002	446
481357	NORTH BAY MEDICAL CENTER	94533	1/1/02 - 12/31/2002	6,992
484001	NORTH BAY VACAVALLEY HOSPITAL	95687	1/1/02 - 12/31/2002	2,174
	NORTHERN CALIFORNIA REHABILITATION HOSPITAL	96001	1/1/02 - 12/31/2002	1,427
141273	NORTHERN INYO HOSPITAL	93514	1/1/02 - 12/31/2002	1,152
	NORTHRIDGE HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	18,323
	NORTHRIDGE HOSPITAL MEDICAL CENTER - SHERM	91405	1/1/02 - 12/31/2002	11,227
190570	NORWALK COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	1,660
214034	NOVATO COMMUNITY HOSPITAL - ROLAND WAY	94945	1/1/02 - 12/31/2002	1,953
	OAK VALLEY DISTRICT HOSPITAL (2-RH)		1/1/02 - 12/31/2002	2,449
	OASIS PSYCHIATRIC HEALTH FACILITY		1/1/02 - 12/31/2002	690
	O'CONNOR HOSPITAL - SAN JOSE		1/1/02 - 12/31/2002	15,333
	OJAI VALLEY COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	1,434
	ORANGE COAST MEMORIAL MEDICAL CENTER		1/1/02 - 12/31/2002	9,775
	ORANGE COUNTY COMMUNITY HOSPITALS		1/1/02 - 12/31/2002	3,269
	OROVILLE HOSPITAL		1/1/02 - 12/31/2002	7,684
	ORTHOPAEDIC HOSPITAL		1/1/02 - 12/31/2002	1,806
	PACIFIC ALLIANCE MEDICAL CENTER, INC.		1/1/02 - 12/31/2002	7,757
	PACIFIC HOSPITALS OF LONG BEACH		1/1/02 - 12/31/2002	8,342
	PACIFIC SHORES HOSPITAL		1/1/02 - 12/31/2002	261
	PACIFICA HOSPITAL OF THE VALLEY		1/1/02 - 12/31/2002	6,646
	PALM DRIVE HOSPITAL		1/1/02 - 12/31/2002	1,576
	PALO VERDE HOSPITAL		1/1/02 - 12/31/2002	2,250
	PALOMAR MEDICAL CENTER		1/1/02 - 12/31/2002	23,086
	PARADISE VALLEY HOSPITAL		1/1/02 - 12/31/2002	13,803
	PARKVIEW COMMUNITY HOSPITAL MEDICAL CENTE		1/1/02 - 12/31/2002	5,616
	PATIENTS' HOSPITAL OF REDDING		1/1/02 - 12/31/2002	512
	PETALUMA VALLEY HOSPITAL		1/1/02 - 12/31/2002	4,300
	PINE GROVE HOSPITAL		1/1/02 - 12/31/2002	1,777
	PIONEERS MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	6,472
	PLACENTIA LINDA HOSPITAL		1/1/02 - 12/31/2002	5,061
	PLUMAS DISTRICT HOSPITAL		1/1/02 - 12/31/2002	657
	POMERADO HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	8,716
	POMONA VALLEY HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	26,941
	PRESBYTERIAN INTERCOMMUNITY HOSPITAL		1/1/02 - 12/31/2002	20,053
	PROVIDENCE SAINT JOSEPH MEDICAL CENTER		1/1/02 - 12/31/2002	14,011
	PROVIDENCE SAINT JOSEPH MEDICAL CENTER		1/1/02 - 12/31/2002	21,032
	QUEEN OF ANGELS/HOLLYWOOD PRESBYTERIAN M		1/1/02 - 12/31/2002	20,757
	QUEEN OF THE VALLEY HOSPITAL - NAPA		1/1/02 - 12/31/2002	8,163
171049	REDBUD COMMUNITY HOSPITAL	90422	1/1/02 - 12/31/2002	1,724

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OSHPD NUMBER ID NO. FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
450940 REDDING MEDICAL CENTER		1/1/02 - 12/31/2002	9,405
361308 REDLANDS COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	13,596
121051 REDWOOD MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	2,136
430705 REGIONAL MEDICAL OF SAN JOSE		1/1/02 - 12/31/2002	13,084
424047 REHABILITATION INSTITUTE AT SANTA BARBARA		1/1/02 - 12/31/2002	540
580996 RIDEOUT MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	6,751
150782 RIDGECREST REGIONAL HOSPITAL		1/1/02 - 12/31/2002	3,424
331312 RIVERSIDE COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	22,234
334487 RIVERSIDE COUNTY REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	19,584
190366 ROBERT F. KENNEDY MEDICAL CENTER		1/1/02 - 12/31/2002	8,032
14113 S.T.A.R.S P H F		1/1/02 - 12/31/2002	145
344011 SACRAMENTO COUNTY P.H.F.		1/1/02 - 12/31/2002	1,743
301317 SADDLEBACK MEMORIAL MEDICAL CENTER	92653	1/1/02 - 12/31/2002	16,656
270875 SALINAS VALLEY MEMORIAL HOSPITAL	93901	1/1/02 - 12/31/2002	13,775
361318 SAN ANTONIO COMMUNITY HOSPITAL	91786	1/1/02 - 12/31/2002	18,341
301325 SAN CLEMENTE HOSPITAL & MEDICAL CENTER	92673	1/1/02 - 12/31/2002	3,085
374055 SAN DIEGO COUNTY PSYCHIATRIC HOSPITAL		1/1/02 - 12/31/2002	1,187
374084 SAN DIEGO HOSPICE ACUTE CARE CENTER	92103	1/1/02 - 12/31/2002	1,059
190673 SAN DIMAS COMMUNITY HOSPITAL	91773	1/1/02 - 12/31/2002	4,509
380939 SAN FRANCISCO GENERAL HOSPITAL		1/1/02 - 12/31/2002	18,289
190200 SAN GABRIEL VALLEY MEDICAL CENTER		1/1/02 - 12/31/2002	12,304
331326 SAN GORGONIO MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	3,681
150788 SAN JOAQUIN COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	9,550
394003 SAN JOAQUIN COUNTY P.H.F.		1/1/02 - 12/31/2002	1,627
391010 SAN JOAQUIN GENERAL HOSPITAL		1/1/02 - 12/31/2002	11,337
104023 SAN JOAQUIN VALLEY REHABILITATION HOSPITAL		1/1/02 - 12/31/2002	908
430879 SAN JOSE MEDICAL CENTER		1/1/02 - 12/31/2002	7,246
13619 SAN LEANDRO HOSPITAL		1/1/02 - 12/31/2002	5,378
400511 SAN LUIS OBISPO GENERAL HOSPITAL		1/1/02 - 12/31/2002	2,561
410782 SAN MATEO MEDICAL CENTER LONG TERM CARE		1/1/02 - 12/31/2002	3,216
410752 SAN MATEO MEDICAL CENTER LONG TERM CARE S		1/1/02 - 12/31/2002	104
74017 SAN RAMON REGIONAL MEDICAL CENTER & REHAI 190681 SAN VICENTE HOSPITAL		1/1/02 - 12/31/2002	6,561
100791 SAN VICENTE HOSPITAL		1/1/02 - 12/31/2002 1/1/02 - 12/31/2002	194 139
301314 SANTA ANA HOSPITAL MEDICAL CENTER INC		1/1/02 - 12/31/2002	3,428
420514 SANTA ANA HOSPITAL MEDICAL CENTER INC		1/1/02 - 12/31/2002	20,200
424002 SANTA BARBARA COUNTY P.H.F.		1/1/02 - 12/31/2002	626
430883 SANTA CLARA VALLEY MEDICAL CENTER		1/1/02 - 12/31/2002	25,936
190687 SANTA CLAKA VALLET MEDICAL CENTER		1/1/02 - 12/31/2002	12,755
560521 SANTA MONICA - OCLA MEDICAL CENTER 560521 SANTA PAULA MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	1,824
491064 SANTA ROSA MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	15,510
190691 SANTA TERESITA HOSPITAL		1/1/02 - 12/31/2002	3,487
420522 SANTA YNEZ VALLEY COTTAGE HOSPITAL		1/1/02 - 12/31/2002	329
371256 SCRIPPS GREEN HOSPITAL		1/1/02 - 12/31/2002	10,062
370658 SCRIPPS MEMORIAL HOSPITAL - CHULA VISTA		1/1/02 - 12/31/2002	11,130
371394 SCRIPPS MEMORIAL HOSPITAL - ENCINITAS		1/1/02 - 12/31/2002	8,636
370771 SCRIPPS MEMORIAL HOSPITAL - LA JOLLA		1/1/02 - 12/31/2002	23,123
370744 SCRIPPS MERCY HOSPITAL		1/1/02 - 12/31/2002	23,493
100793 SELMA COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	3,362
124004 SEMPERVIRENS P.H.F.		1/1/02 - 12/31/2002	642
321016 SENECA HOSPITAL		1/1/02 - 12/31/2002	360
410891 SEQUOIA HOSPITAL		1/1/02 - 12/31/2002	9,645
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OSUBD NUMBER	ZID	DEDORT	TOTAL
OSHPD NUMBER ID NO. FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
410817 SETON MEDICAL CENTER		1/1/02 - 12/31/2002	9,551
410828 SETON MEDICAL CENTER - COASTSIDE		1/1/02 - 12/31/2002	84
370693 SHARP CABRILLO HOSPITAL		1/1/02 - 12/31/2002	1,059
370875 SHARP CHULA VISTA MEDICAL CENTER		1/1/02 - 12/31/2002	14,085
370689 SHARP CORONADO HOSPITAL AND HEALTHCARE CI		1/1/02 - 12/31/2002	3,032
370695 SHARP MARY BIRCH HOSPITAL FOR WOMEN		1/1/02 - 12/31/2002	14,689
370694 SHARP MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	17,344
370745 SHARP MEMORIAL HOSPITAL D/P APH		1/1/02 - 12/31/2002	5,051
451019 SHASTA COUNTY P H F		1/1/02 - 12/31/2002	902
190708 SHERMAN OAKS HOSPITAL AND HEALTH CENTER		1/1/02 - 12/31/2002	4,830
190712 SHRINERS HOSPITAL FOR CRIPPLED CHILDREN - L./		1/1/02 - 12/31/2002	1,605
344114 SHRINERS HOSPITALS FOR CHILDREN NORTHERN (1/1/02 - 12/31/2002	1,407
100797 SIERRA KINGS DISTRICT HOSPITAL		1/1/02 - 12/31/2002	3,826
291023 SIERRA NEVADA MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	7,118
461024 SIERRA VALLEY DISTRICT HOSPITAL		1/1/02 - 12/31/2002	32
540798 SIERRA VIEW DISTRICT HOSPITAL		1/1/02 - 12/31/2002	9,569
342392 SIERRA VISTA HOSPITAL		1/1/02 - 12/31/2002	2,231
400524 SIERRA VISTA REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	7,029
560525 SIMI VALLEY HOSPITALS & HEALTH CARE SERVICES		1/1/02 - 12/31/2002	7,073
491076 SONOMA VALLEY HOSPITAL	95476	1/1/02 - 12/31/2002	2,441
551034 SONORA COMMUNITY HOSPITALS	95370	1/1/02 - 12/31/2002	4,512
301337 SOUTH COAST MEDICAL CENTER	92677	1/1/02 - 12/31/2002	5,441
141338 SOUTHERN INYO HOSPITAL	93545	1/1/02 - 12/31/2002	143
334068 SOUTHWEST HEALTHCARE SYSTEM-MURRIETA	92362	1/1/02 - 12/31/2002	12,760
334001 SOUTHWEST HEALTHCARE SYSTEM-WILDOMAR	92395	1/1/02 - 12/31/2002	4,735
100899 ST. AGNES MEDICAL CENTER	93710	1/1/02 - 12/31/2002	25,352
361339 ST. BERNARDINE MEDICAL CENTER	92404	1/1/02 - 12/31/2002	17,325
394009 ST. DOMINIC'S HOSPITAL	95336	1/1/02 - 12/31/2002	2,379
521041 ST. ELIZABETH COMMUNITY HOSPITAL	96080	1/1/02 - 12/31/2002	4,266
190754 ST. FRANCIS MEDICAL CENTER	90262	1/1/02 - 12/31/2002	23,586
420528 ST. FRANCIS MEDICAL CENTER OF SANTA BARBARA	93103	1/1/02 - 12/31/2002	2,522
380960 ST. FRANCIS MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	7,305
281078 ST. HELENA HOSPITAL	94576	1/1/02 - 12/31/2002	5,295
190756 ST. JOHN'S HOSPITAL & HEALTH CENTER	90404	1/1/02 - 12/31/2002	13,731
560508 ST. JOHN'S PLEASANT VALLEY HOSPITAL		1/1/02 - 12/31/2002	4,366
560529 ST. JOHN'S REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	13,128
121080 ST. JOSEPH HOSPITAL - EUREKA		1/1/02 - 12/31/2002	7,073
301340 ST. JOSEPH HOSPITAL - ORANGE		1/1/02 - 12/31/2002	25,555
392232 ST. JOSEPH'S BEHAVIORAL HEALTH CENTER		1/1/02 - 12/31/2002	1,335
391042 ST. JOSEPH'S MEDICAL CENTER OF STOCKTON		1/1/02 - 12/31/2002	18,243
301342 ST. JUDE MEDICAL CENTER		1/1/02 - 12/31/2002	17,246
434138 ST. LOUISE REGIONAL HOSPITAL - GILROY		1/1/02 - 12/31/2002	4,264
190759 ST. LUKE MEDICAL CENTER		1/1/02 - 12/31/2002	297
380964 ST. LUKE'S HOSPITAL		1/1/02 - 12/31/2002	7,541
190053 ST. MARY MEDICAL CENTER		1/1/02 - 12/31/2002	15,834
361343 ST. MARY REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	13,325
380965 ST. MARY'S MEDICAL CENTER, SAN FRANCISCO		1/1/02 - 12/31/2002	7,466
10967 ST. ROSE HOSPITAL		1/1/02 - 12/31/2002	8,695
190762 ST. VINCENT MEDICAL CENTER		1/1/02 - 12/31/2002	10,080
430905 STANFORD HOSPITAL		1/1/02 - 12/31/2002	19,767
501016 STANISLAUS BEHAVIORAL HEALTH CENTER		1/1/02 - 12/31/2002	3,621
504038 STANISLAUS SURGICAL HOSPITAL	95355	1/1/02 - 12/31/2002	714

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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST Calendar Year, 2002

OSHPD ID NO.	NUMBER FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
194967	STAR VIEW ADOLESCENT - P H F	90505	1/1/02 - 12/31/2002	122
190599	SUBURBAN MEDICAL CENTER	90723	1/1/02 - 12/31/2002	8,763
	SUN HEALTH ROBERT H. BALLARD REHABILITATION		1/1/02 - 12/31/2002	755
250955	SURPRISE VALLEY COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	59
	SUTTER AMADOR HOSPITAL - MISSION BLVD		1/1/02 - 12/31/2002	2,912
	SUTTER AUBURN FAITH HOSPITAL		1/1/02 - 12/31/2002	6,023
	SUTTER CENTER FOR PSYCHIATRY		1/1/02 - 12/31/2002	2,431
	SUTTER COAST HOSPITAL		1/1/02 - 12/31/2002	3,114
	SUTTER DAVIS HOSPITAL - SUTTER PL		1/1/02 - 12/31/2002	4,196
	SUTTER DELTA MEDICAL CENTER		1/1/02 - 12/31/2002	6,816
	SUTTER GENERAL HOSPITAL		1/1/02 - 12/31/2002	12,312
	SUTTER LAKESIDE HOSPITAL		1/1/02 - 12/31/2002	2,849
	SUTTER MATERNITY & SURGERY CENTER OF SANT/		1/1/02 - 12/31/2002	2,698
	SUTTER MEDICAL CENTER OF SANTA ROSA		1/1/02 - 12/31/2002	9,804
	SUTTER MEMORIAL HOSPITAL		1/1/02 - 12/31/2002	20,293
	SUTTER ROSEVILLE MEDICAL CENTER		1/1/02 - 12/31/2002	14,683
	SUTTER SOLANO MEDICAL CENTER		1/1/02 - 12/31/2002	5,901
	SUTTER TRACY COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	4,229
	SUTTER WARRACK HOSPITAL		1/1/02 - 12/31/2002	1,373
	SUTTER-YUBA PSYCHIATRIC HEALTH FACILITY		1/1/02 - 12/31/2002	272
	TAHOE FOREST HOSPITAL		1/1/02 - 12/31/2002	2,592
	TARZANA TREATMENT CENTER		1/1/02 - 12/31/2002	2,361
	TEHACHAPI HOSPITAL		1/1/02 - 12/31/2002	120
	TELECARE PLACER COUNTY PSYCHIATRIC HEALTH		1/1/02 - 12/31/2002	416
	TELECARE SOLANO PSYCHIATRIC HEALTH FACILITY		1/1/02 - 12/31/2002	464
	TEMPLE COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	3,249
	THUNDER ROAD CHEMICAL DEPENDENCY RECOVER		1/1/02 - 12/31/2002	260
	TOM REDGATE MEMORIAL RECOVERY CENTER		1/1/02 - 12/31/2002	956
	TORRANCE MEMORIAL MEDICAL CENTER		1/1/02 - 12/31/2002	25,908
	TRI-CITY MEDICAL CENTER		1/1/02 - 12/31/2002	20,062
	TRI-CITY REGIONAL MEDICAL CENTER		1/1/02 - 12/31/2002	2,518
	TRINITY HOSPITAL		1/1/02 - 12/31/2002	518
	TULARE DISTRICT HOSPITAL		1/1/02 - 12/31/2002	5,936
	TUOLUMNE GENERAL HOSPITAL		1/1/02 - 12/31/2002	1,767
	TUSTIN HOSPITAL MEDICAL CENTER		1/1/02 - 12/31/2002	728
	TWIN CITIES COMMUNITY HOSPITAL		1/1/02 - 12/31/2002	5,509
	UCLA MEDICAL CENTER		1/1/02 - 12/31/2002	29,289
	UCLA NEUROPSYCHIATRIC HOSPITAL		1/1/02 - 12/31/2002	2,452
	UCSD/LA JOLLA - THORNTON HOSPITAL		1/1/02 - 12/31/2002	4,771
	UCSF MEDICAL CENTERS		1/1/02 - 12/31/2002	26,660
	UKIAH VALLEY MEDICAL CENTER		1/1/02 - 12/31/2002	4,773
	UNIVERSITY COMMUNITY MEDICAL CENTER		1/1/02 - 12/31/2002	3,492
	UNIVERSITY MEDICAL CENTER		1/1/02 - 12/31/2002	13,219
	UNIVERSITY OF CALIFORNIA DAVIS MEDICAL CENTE		1/1/02 - 12/31/2002	26,898
	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTI		1/1/02 - 12/31/2002	17,864
	UNIVERSITY OF CALIF-SAN DIEGO MEDICAL CENTER		1/1/02 - 12/31/2002	18,285
	USC KENNETH NORRIS, JR. CANCER HOSPITAL		1/1/02 - 12/31/2002	2,870
	USC UNIVERSITY HOSPITALS		1/1/02 - 12/31/2002	8,223
	VALLEY MEMORIAL HOSPITALS		1/1/02 - 12/31/2002	8,619
	VALLEY PLAZA DOCTORS HOSPITAL		1/1/02 - 12/31/2002	925
	VALLEY PRESBYTERIAN HOSPITAL		1/1/02 - 12/31/2002	14,364
	VENTURA COUNTY MEDICAL CENTER		1/1/02 - 12/31/2002	11,228
300701	TELLISION COOKER INCOME OF WILLIAM	55555	12.0 1/2002	11,220

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CALIFORNIA PATIENT DISCHARGE DATA HOSPITAL LIST Calendar Year, 2002

OSHPD ID NO.	NUMBER FACILITY NAME	ZIP CODE	REPORT PERIOD	TOTAL DISCHS
190818	VERDUGO HILLS HOSPITAL	91208	1/1/02 - 12/31/2002	6,291
361370	VICTOR VALLEY COMMUNITY HOSPITAL	92392	1/1/02 - 12/31/2002	7,480
374049	VISTA PACIFICA	92111	1/1/02 - 12/31/2002	217
10987	WASHINGTON HOSPITAL - FREMONT	94538	1/1/02 - 12/31/2002	17,966
444013	WATSONVILLE COMMUNITY HOSPITAL - NIELSON ST	95076	1/1/02 - 12/31/2002	6,796
301379	WEST ANAHEIM MEDICAL CENTER	92804	1/1/02 - 12/31/2002	9,205
190859	WEST HILLS HOSPITAL & MEDICAL CENTER	91307	1/1/02 - 12/31/2002	9,450
301566	WESTERN MEDICAL CENTER - SANTA ANA	92705	1/1/02 - 12/31/2002	16,227
301188	WESTERN MEDICAL CENTER HOSPITAL - ANAHEIM	92805	1/1/02 - 12/31/2002	9,983
190878	WHITE MEMORIAL MEDICAL CENTER	90033	1/1/02 - 12/31/2002	19,004
190883	WHITTIER HOSPITAL MEDICAL CENTER	90605	1/1/02 - 12/31/2002	11,044
571086	WOODLAND MEMORIAL HOSPITAL	95695	1/1/02 - 12/31/2002	4,648

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OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT PATIENT DISCHARGE DATA PROGRAM

MANUAL ABSTRACT REPORTING FORM

For use with discharges on 1/1/99 and after

Instructions: For a description of the data elements, refer to the appropriate section of Discharge Data Regulations (Sections 97210 through 97239, Title 22, California Code of Regulations).

1. TYPE OF CARE	1a. HOSPITAL	NUMBER		17. AE	BSTRACT F	RECORD NUM	/IBER (Option	onal)			
1 Acute 5 Chem Dep											\neg
3 SN/IC 6 Physical Rehab											
4 Psychiatric											
2. DATE OF BIRTH Month Day Year (4 - Digit)		SOCIAL SECURITY		al record))	3. SE 1 Ma 2 Fel	ile 3	Other			
4. RACE:						5. Z II	CODE				
ETHNICITY	RACE									_	
1 Hispanic	1 White		sian/Pacific								
2 Non-Hispanic	2 Black		slander								
3 Unknown	3 Native Ameri										
	Eskimo/Ale	ut 6 Ui	nknown								
6. ADMISSION DATE	9. DISCHARGE	DATE				16. T	OTAL CHAF	RGES			
]
Month Day Year (4 - Digit)	Мо	onth Day	Year (4 - L	Digit)			(Réport who	le dollars only	, right jus	tified)	
7. SOURCE OF ADMISSION:						8. TY	PE OF ADM	IISSION			
SITE	LICENSURE OF	SITE	ROUTE								
1 Home 6 Other <u>Inpatient</u>	1 This Hospital		1 Your ER			1 Sc	heduled				
2 Residential Hospital Care	2 Another		2 Not Your	ER		2 Ur	nscheduled				
Care Facility 7 Newborn	Hospital		(or no E	ER)		3 In	fant, under	24 hrs old]
3 Ambulatory 8 Prison/Jail	3 Not a					4 Uı	nknown				
Surgery 9 Other	Hospital										
4 SN/IC											
5 Acute <u>Inpatient</u> Hospital Care											
15. EXPECTED SOURCE OF PAYMENT:											
PAYER CATEGORY		TYPE OF COVER	AGE				ı	NAME OF PL	_AN		
01 Medicare 06 Other Government		1 Managed Care									
02 Medi-Cal 07 Other Indigent		Knox - Keer									
03 Private Coverage 08 Self Pay		MCOHS									
04 Workers' 09 Other Payer	, <u> </u>	2 Managed Care	e - Other								
Compensation		3 Traditional Co	overage			(0	001 - 9999	Plan Code	Number)	
05 County Indigent Programs	•					-					
14. DISPOSITION OF PATIENT:		21. PREHOSPIT	TAL CARE AN	ID		E - CODES:					
S.S. SSITION OF FAMILIAT.		RESUSCIT			1				\top		\neg
01 Routine (Home) 07 SN/IC		RESUSCI	IATION			18. PRIN	ICIPAL	E		1	
Within This Hospital 08 Residential Ca	are Facility	DNR orders	at admission	or						-	
02 Acute Care 09 Prison/Jail	•	within 24 hrs	s of admissio	n							
03 Other Care 10 Against Medic	al Advice				1			E			
04 SN/IC 11 Died					1			E		Ī	Ī
To Another Hospital 12 Home Health	Service				1	19. OTH	IER				
05 Acute Care 13 Other		Y = Yes	s		1			Е			
06 Other Care (Not SN/IC)		N = N	0								
					1			E			

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APPENDIX G

OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT Page 2 of 2 PATIENT DISCHARGE DATA PROGRAM **APPENDIX G** SUPPLEMENTAL REPORTING PAGE For use with discharges on 1/1/99 and after 10. PRINCIPAL DIAGNOSIS 10a. PRESENT AT 12. PRINCIPAL PROCEDURE DATE CODE ADMISSION CODE Y = YesN = NoU = Uncertain Year (4 - Digit) Month Day 11. OTHER DIAGNOSES 11a. PRESENT AT 13. OTHER PROCEDURES ADMISSION b. b. d. d. g. g. h. m. m. n. n. p. p. q. q. t. u.

Consol.	Par/	Parent/Satellite	Former	6-Digit		HFPA	Consol.	Unconsol.	Comments
#	Sat #	Name	Name	I.D. #	Citv	#	Date	Date	Field
001	19	Alta Bates Hospital - Ashby	Alta Bates Hospital	010739	Berkeley	0415	7/12/1984	12/1/1986	1.000
001	01	Alta Bates Hospital at Albany	Albany Hospital	013636	Berkeley	0415	7/12/1984	12/1/1986	
002	19	Cedars Sinai Medical Center	, manny 1 100 p. 100 n	190555	Los Angeles	0925	10/5/1984	12/31/1986	Per L&C, "Satellite became a parking lot
002	01	Beverly Hills Hospital		N/A	Los Angeles	0927	10/5/1984	12/31/1986	prior to, or around consolidation date."
003	19	Lakewood Rgnl Med Ctr - South St.	Drs. Hospital of Lakewood	190240	Lakewood	0933	9/14/1984		
003	01	Lakewood Rgnl Med Ctr - Clark Ave.	Lakewood General Hospital	190453	Lakewood	0933	9/14/1984	6/1/1998	Into Suspense2/29/96, Delicensed 6/1/98
004	19	Kaiser Foundation Hosp - Bellflower	Kaiser Foundation Hospital	190430	Bellflower	0921	5/17/1984	10/6/1998	
004	01	Kaiser Foundation Hosp - Norwalk	Kaiser Foundation Hospital	190428	Norwalk	0921	5/17/1984	10/6/1998	Closed 10/6/98
005	19	Kaiser Foundation Hosp - San Diego	Kaiser Foundation Hospital	370730	San Diego	1416	4/9/1984	9/7/2000	
005	01	Kaiser Foundation Hosp - El Cajon	Kaiser Foundation Hospital	370716	El Cajon	1422	4/9/1984	9/7/2000	De-Licensed 9/7/00
006	19	Memorial Hosp Med Center - Modesto	Memorial Hospital - Modesto	500939	Modesto	0511	9/1/1984	5/1/1995	De-Licensed 9/1/00
006	01	Memorial Hospital Med Center - Modesto	Memorial Hospital - Modesto	500939	Ceres	0511	9/1/1984	5/1/1995	De-Licensed 5/1/95
007	19	·	<u>'</u>	370746		1416	8/1/1984	7/1/1986	De-Licensed 3/1/93
007	01	Mission Bay Memorial Hospital AMI Mission Bay Mem Hosp - Montezu	AMI Mission Bay Memorial Hosp College Park Hospital	370683	San Diego San Diego	1418	8/1/1984	7/1/1986	Clad 7/11/96: reepand on CDDH 2/26/99
007	19	, ,	College Park Hospital	430837		0431	8/15/1984	1/31/1992	Clsd 7/11/86; reopened as CDRH 2/26/88
008	01	O'Connor Hospital	Comphell Community Heavital	431722	San Jose	0431		7/1/1986	De-Licensed 1/31/92.
009	19	O'Connor Hospital at Campbell	Campbell Community Hospital	010937	Campbell	0431	8/15/1984 7/1/1984	1/4/1987	De-Licensed 1/31/92.
		Merritt Hospital	Samuel Merritt Hospital		Oakland				Do Lisaneed on Thursday Dood CDD 4/5/07
009	01	Samuel Merritt Hospital - North	Calif Surg Ctr & Women's Hospital	010782 491064	Oakland	0417	7/1/1984 7/20/1984	1/4/1987 6/30/1987	Re-Licensed as Thunder Road CDR 1/5/87.
010	19 01	Santa Rosa Memorial Hospital - Montg	Santa Rosa Memorial Hospital	491004	Santa Rosa	0401	7/20/1984		
010 011	19	Santa Rosa Memorial Hospital - A St.	Santa Rosa General Hospital	551034	Santa Rosa	-	8/1/1984	6/30/1987	- L D /0 / // 00 // 0/05/00
011	01	Sonora Community Hospital - Forest	Sonora Hospital	552209	Sonora	0513 0513	8/1/1984		Formerly Par/Sat # 39 until 6/25/93.
011	02	Sonora Comm Hospital - Fairview Sonora Community Hospital	Sierra Hospital Sonora Convalescent Hospital	551035	Sonora Sonora	0513	12/16/1986	6/25/1993	LTC converted to parent D.P. 6/25/93.
012	19		Sonora Convalescent Hospital	370780		1414	8/1/1984	8/1/1993	ETO converted to parent B.F. 0/25/95.
012	01	Tri-City Hospital Tri-City Hospital - West	North County Community Hospital	370753	Oceanview Oceanview	1414	8/1/1984	8/1/1993	De-Licensed 8/1/93.
012	19	•	, , , , , , , , , , , , , , , , , , ,	190431		0933	3/4/1985	0/1/1993	De-Licensed of 1793.
013	01	Kaiser Found Hospital - Harbor City Kaiser Found Hospital - Carson	Kaiser Foundation Hospital Kaiser Foundation Hospital	190431	Harbor City Carson	0933	3/4/1985		
013	19	'	i i	380929		0423	6/23/1985	6/16/1994	D
014	01	Presbyterian Hosp of Pacific Med Ctr Garden Sullivan Hosp of Pac Med Ctr	"Mills Mem" (Church of St) Hosp Garden Sullivan Hospital	382684	San Francisco San Francisco	0423	6/23/1985	6/16/1994	Re-consolidated as consol. # 076. Re-consolidated as consol. # 076.
014	19	'	· · · · · · · · · · · · · · · · · · ·	560502		0811	6/1/1985	1/13/1989	Re-consolidated as consol. # 076.
	01	Channel Islands Comm Hosp - Hobson	Oxnard Community Hospital Channel Islands Horizon Hospital		Oxnard Oxnard	0811	6/1/1985	1/13/1989	
015 016	19	Channel Islands Comm Hosp - Ventura		560838 190429		0925	4/19/1984	5/14/1991	
		Kaiser Foundation Hospital - Sunset	Kaiser Foundation Hospital		Los Angeles	-			
016 017	01 19	Kaiser Foundation Hosp - Inglewood	Kaiser Foundation Hospital	190433 190323	Inglewood	0925	4/19/1984 6/6/1985	5/14/1991 5/31/1990	
017	01	Glendale Adventist Med Ctr., Chayy Ch.	Glendale Adventist Medical Center	190323	Glendale	0909		5/31/1990	
017	19	Glendale Adventist Med Ctr - Chevy Ch	Glendale Community Hospital	190326	Glendale	0909	6/6/1985 1/1/1985	3/26/1990	<u> </u>
018	01	Beverly Hills Medical Center	Los Angeles New Hospital		Los Angeles	0927	1/1/1985	3/26/1990	De-Licensed 3/26/90.
		Beverly Hills Medical Center - Pico	Beverly Glen Hospital	190078 410782	Los Angeles	0927	1/7/1985	3/20/1990	De-Lice 1880 3/20/80.
019	19	San Mateo Medical Center	Harold D. Chope Community Hosp		San Mateo				Name shared 2/4/02
019	01	San Mateo Medical Center LTC Services	Crystal Springs Rehabilitation Ctr	410752	San Mateo	0427	1/7/1986		Name changed 2/1/02.
020	19	Santa Barbara Cottage Hospital	Discovert Heavital	420514	Santa Barbara	0807	4/8/1986		
020	01	Santa Barbara Cottage Care Center	Pinecrest Hospital	420506	Santa Barbara	0807	4/8/1986	<u> </u>	<u> </u>
021	19	Antelope Valley Hosp Med Ctr - West	Antelope Valley District Hospital	190034	Los Angeles	0901	11/24/1986		

Par/Sat # Parent Locations: (Codes): 19 - Acute Consol, Only

<u>Satellite Locations</u>: Sequentially Numbered; 01 - 09

29 - LTC Consol, Only 39 - Acute and LTC Consol

# Sa 021 0 022 1	Par/ Sat #	Parent/Satellite Name	Former	6-Digit		HFPA	Consol.	Unconsol.	Comments
021 0 022 1			Name	I.D. #	City	#	Date	Date	Field
022 1	UI I	Antelope Valley Hosp M.C Palmdale	Not Available	Pending	Los Angeles	0901	11/24/1986		Possibly via CON & never occurred.
	19	Community Hosp Monterey Peninsula	Community Hosp of the Mont Pen	270744	Monterey	0707	1/1/1987	12/1/1993	
	01	Community Hosp Recovery Center	Recovery Center Mont Peninsula	271118	Monterey	0707	1/1/1987	12/1/1993	De-Licensed 12/1/93.
023 2	29	Sutter General Hospital		341051	Sacramento	0311	11/1/1986	3/1/1996	Re-consolidated as consol. # 115.
	01	Sutter Oaks Nursing Ctr - Midtown	Park Sutter Convalescent Hospital	341119	Sacramento	0311	11/1/1986	3/1/1996	3/1/96 = Sutter Oaks Nrsg Ctr-Midtown.
		Simi Valley Hosp & Health Care Svcs	Simi Valley Adventist Hospital	560525	Simi Valley	0813	2/16/1987		
024 0		Simi Val Hosp Inc DBA Mountain View	Simi Valley Community Hosp Inc.	560526	Simi Valley	0813	2/16/1987		
	29	Children's Hospital - San Diego		370673	San Diego	1416	12/1/1986		
025 0	01	Children's Convalescent Hospital		370777	San Diego	1416	12/1/1986		
026 1	19	Nu-Med Rgnl Med Ctr - West Valley	West Park Hospital	190860	Canoga Park	0905	7/22/1986	1/26/1989	
026 0	01	Nu-Med Rgnl Med Ctr - Valley Park	Valley Park Medical Center	190605	Canoga Park	0905	7/22/1986	1/26/1989	
	19	Riverside Community Hosp Med Ctr		331312	Riverside	1111	12/1/1986	12/18/1992	
	01	Riverside Comm Hosp Knollwood Ctr	Knollwood Community Hospital	331226	Riverside	1111	12/1/1986	12/18/1992	
	19	Doctors Medical Center	Doctors Hospital of Modesto	500852	Modesto	0511	2/1/1987		Re-consolidated as consol. # 069.
	01	Modesto City Hospital	Doctors Frospital of Wodesto	500954	Modesto	0511	2/1/1987	11/18/1992	The consolidated as consoli # 000.
		San Diego Co. Psychiatric Hospital	San Diego Co. Hillcrest Mntl Hlth	374055	San Diego	1418	3/30/1988	1111011002	Replaced SD Co Hillcrest M. H. 7/25/89.
		Edgemoor Geriatric Hospital	San Diego Co. Tillicrest With That	370696	Santee	1422	3/30/1988		Treplaced 3D GO Tillicrest W. Tr. 1723/09.
		Sharp Memorial Hospital	Donald N. Sharp Memorial Comm	370694	San Diego	1416	2/5/1987		Formerly Par/Sat # 39 until 3/11/87 when LTC
030		Sharp Knollwood	Knollwood West Conv. Hospital	370733	San Diego	1416	2/5/1987	8/20/1987	converted to parent D.P. Effective 3/27/98,
030		Sharp Cabrillo Hospital	Cabrillo Med Ctr & Doctors Hosp	370693	San Diego	1418	2/1/1996	0.20, 100.	150 psych beds from Mesa Vista added as D.P. Psych
		Oak Valley District Hospital		500967	Oakdale	0511	7/31/1987	7/1/1993	
	01	Oak Valley Care Center	Oakdale Convalescent Hospital	501352	Oakdale	0511	7/31/1987	7/1/1993	LTC converted to parent D.P. 7/1/93.
	29	Mercy General Hospital	Mercy Hospital of Sacramento	340947	Sacramento	0311	10/4/1987	4/1/1994	
	01	Mercycare	Hillhaven Convalescent Hospital	340901	Sacramento	0311	10/4/1987	4/1/1994	
	29	Little Company of Mary Hospital		190470	Torrance	0931	3/17/1987	4/1/1994	
	01	Little Company of Mary Pavilion		190702	Torrance	0931	3/17/1987	4/1/1994	
	29	Corona Community Hospital		331152	Corona	1111	12/8/1987	10/27/1992	
	01	Corona Community Care Center		330223	Corona	1111	12/8/1987	10/27/1992	CHON; 10/27/92 Life Care Ctr of Corona.
	29	Kaiser Foundation Hospital - Fontana	Kaiser Foundation Hospital	361223	Fontana	1209	10/28/1979	date	Unconsolidated; date unknown.
	01	Kaiser Foundation Hospital - SNF	Trailor Foundation Floopital	N/A	Fontana	1209	10/28/1979	unknown	orioonidated, date dindrews.
	29	Providence St. Joseph Medical Center	St. Joseph Medical Center	190758	Burbank	0907	9/4/1981	date	Sat. clsd (earthquake); parent GAC beds
	01	Esther Parisean Pavilion - Rehab Care	Medical Plaza Extended Care Fac	190519	Burbank	0907	9/4/1981	unknown	converted to SNF on par. license 9/19/94.
	29	San Pedro Peninsula Hospital	San Pedro & Peninsula Hospital	190680	San Pedro	0933	11/15/1982	12/1/1993	Similar to Give on pair monitor of force.
	01	Peninsula Hospital	Harbor Crest Pavilion	190362	San Pedro	0933	11/15/1982	12/1/1993	Date of unconsolidation approximate.
	29	Long Beach Memorial Medical Center	Mem Hosp Med Ctr of Long Beach	190525	Long Beach	0933	12/31/1982	8/23/1984	
	01	Coastview Convalescent Hospital	Ment Floop Med Oil of Long Bodon	190701	Long Beach	0933	12/31/1982	8/23/1984	LTC converted to parent D.P. 8/23/84.
	29	Emanuel Medical Center		500867	Turlock	0516	7/25/1983	2/22/1993	
		Brandel Manor		500806	Turlock	0516	7/25/1983	2/22/1993	LTC converted to parent D.P. 2/22/93.
	29	Ojai Valley Community Hospital		560501	Ojai	0809	12/13/1983	6/30/1993	
	01	Ojai Manor Convalescent Hospital		560500	Ojai	0809	12/13/1983	6/30/1993	Date of unconsolidation approximate.
	19	Lompoc District Hospital		420491	Lompoc	0805	5/9/1985	6/25/1985	
	01	Lompoc Hospital Dist Conv Care Ctr		420552	Lompoc	0805	5/9/1985	6/25/1985	LTC converted to parent D.P. 6/25/85.

Par/Sat # Parent Locations: (Codes): 19 - Acute Consol, Only

<u>Satellite Locations</u>: Sequentially Numbered; 01 - 09

Consol.	Par/	Parent/Satellite	Former	6-Digit		HFPA	Consol.	Unconsol.	Comments
#	Sat #	Name	Name	I.D. #	City	#	Date	Date	Field
042	29	Hazel Hawkins Memorial Hospital		350784	Hollister	0701	6/27/1985		
042	01	Hazel Hawkins Convalescent Hospital		350783	Hollister	0701	6/27/1985		
042	02	Hazel Hawkins Convalescent Hospital	Sunbridge Care Ctr for Hollister	351814	Hollister	0701	10/26/01		
043	29	Palomar Medical Center		370755	Escondido	1412	11/22/1985		
043	01	Palomar Continuing Care Center	Parkway Terrace ICF	371696	Escondido	1412	11/22/1985		
044	29	Santa Clara Valley Medical Center		430883	San Jose	0431	2/12/1986	6/23/1986	
044	01	East Valley Pavilion	El Dorado Guidance Center	431533	San Jose	0431	2/12/1986	6/23/1986	LTC converted to parent D.P. 6/23/86.
045	19	Ukiah Valley Medical Center - Hospital	Ukiah Adventist Hospital	231396	Ukiah	0113	8/8/1988	7/1/2001	
045	01	Ukiah Valley Medical Center - Dora St.	Ukiah General Hospital	231339	Ukiah	0113	8/8/1988	7/1/2001	Closed 7/1/2001
046	19	California Campus Hospital	Children's Hosp of San Francisco	380777	San Francisco	0423	6/9/1988	6/16/1994	Re-consolidated as consol. # 076
046	01	California Campus Hospital	Marshal Hale Memorial Hospital	380826	San Francisco	0423	6/9/1988	6/16/1994	Re-consolidated as consol. # 076
047	29	Los Medanos Community Hospital		073638	Pittsburg	0411	11/1/1988	4/28/1994	De-Licensed 4/28/94.
047	01	Regency Hills Convalescent Hospital		074002	Pittsburg	0411	11/1/1988	4/28/1994	
048	19	Kaiser Foundation Hospital - Geary	Kaiser Foundation Hospital	380857	San Francisco	0423	6/30/1989	12/1/2000	
048	01	Kaiser Foundation Hospital - French	French Hospital	380816	San Francisco	0423	6/30/1989	12/1/2000	Closed 12/1/2000
049	19	Summit Medical Ctr - North Pavilion	Samuel Merritt Hospital	010937	Oakland	0417	9/1/1989		
049	01	Summit Medical Ctr - South Pavilion	Peralta Hospital	010919	Oakland	0417	9/1/1989		
050	19	Alta Bates Medical Center - Ashby	Alta Bates Hospital	010739	Berkeley	0415	10/1/1989		
050	01	Alta Bates Medical Center - Herrick	Herrick Hospital & Health Center	010844	Berkeley	0415	10/1/1989		
051	19	Dominican Santa Cruz Hosp - Soquel		440755	Santa Cruz	0703	3/8/1990		
051	01	Domin. Santa Cruz Hosp - Frederick	Community Hosp of Santa Cruz	441807	Santa Cruz	0703	3/8/1990		
052	19	Good Samaritan of Santa Clara Valley		430779	San Jose	0431	4/26/1990		
052	01	Good Sam of S. C. Val - Mission Oaks	Mission Oaks Hospital	430915	Los Gatos	0431	4/26/1990		
052	02	Good Samaritan Hosp Chem Dep Rec	Bowling Green Chem Dep Institute	431899	Campbell	0431	11/10/1992	6/3/1997	Delicensed - unconsolidated 6/3/1997
053	19	AMI Tarzana Regional Medical Center		190517	Tarzana	0905	10/31/89	Late '90	
053	01	Rancho Encino Hosptial	Medical Center of Encino	190862	Encino	0905	10/31/1989	Late '90	De-Licensed late 1990.
054	19	Santa Ana Hospital Medical Center		301314	Santa Ana	1012	6/19/1990	8/26/1996	
054	01	Doctors Hospital of Santa Ana		301167	Santa Ana	1012	6/19/1990	8/26/1996	
055	29	Modoc Medical Center		250956	Alturas	0201	6/28/1990	6/28/1990	
055	01	Care West - Warner Mtn Nursing Ctr.		252219	Alturas	0201	6/28/1990	6/28/1990	Error - were never consolidated.
056	19	Lodi Memorial Hospital		390923	Lodi	0505	9/5/1990		
056	01	Lodi Memorial Hospital - West	Doctor's Hospital of Lodi	390922	Lodi	0505	9/5/1990		
057	19	Doctors Hospital of Montclair		361166	Montclair	1207	5/31/1990	8/1/1994	
057	01	Doctors Hosp of Montclair - Ontario	Ontario Community Hospital	361274	Ontario	1207	5/31/1990	8/1/1994	
058	19	Bay Harbor Hospital		190057	Harbor City	0933	2/1/1991		
058	02	Bay Harbor Hospital West	Bay Harbor Rehabilitation Center	190788	Torrance	0931	2/1/1991		
059	19	Comm & Miss Hosp of Huntington Park	Community Hosp of Huntington Pk.	190197	Huntington Park	0923	8/30/1991		
059	01	Mission Hospital of Huntington Park	Mission Hospital	190538	Huntington Park	0923	8/30/1991		
060	19	Alvarado Parkway Institute	Alvarado Community Hosp - East	370749	La Mesa	1422	9/12/1991	9/12/1991	Sold to Charter 6/30/94.
060	01	Alvarado Pkwy Inst Child & Adoles.		374048	San Diego	1418	9/12/1991	9/12/1991	Error - were never consolidated.
061	19	Valley Memorial Hospital - Livermore		010983	Livermore	0419	12/9/1991		
061	01	Valleycare Medical Center		014050	Pleasanton	0419	12/9/1991		

Par/Sat # Parent Locations:

(Codes): 19 - Acute Consol, Only 29 - LTC Consol, Only

Satellite Locations: Sequentially Numbered; 01 - 09

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Consol.	Par/	Parent/Satellite	Former	6-Digit	014	HFPA	Consol.	Unconsol.	Comments
#	Sat #	Name	Name	I.D. #	City	#	Date	Date	Field
062	19	Orange Co. Comm Hosp - Buena Park	Buena Park Community Hospital	301242	Buena Park	1013	11/6/1991		
062	01	Orange Co. Comm Hospital - Orange	Care Unit Hospital of Orange	301121	Orange	1015	11/6/1991	2/28/1998	Site Unconsolidated & Closed
062	02	Bellwood General Hospital		190069	Bellflower	0921	6/17/1996		Became Satellite # 01 on 2/28/1998
063	19	Hollywood Comm Hosp of Hollywood	Hollywood Community Hospital	190380	Hollywood	0925	1/1/1992		
063	01	Hollywood Comm Hosp of Van Nuys	Van Nuys Community Hospital	190814	Van Nuys	0905	1/1/1992		
064	29	Brookside Hospital		070904	San Pablo	0413	6/1/1992	6/1/1995	
064	01	Brookside Care Center	Creekside Care Center	070932	San Pablo	0413	6/1/1992	6/1/1995	LTC converted to parent D.P. 6/1/95.
065	19	Mercy San Juan Hospital		340950	Carmichael	0309	5/31/1992		
065	01	Mercy American River Hospital	American River Hospital	340869	Carmichael	0309	5/31/1992		
066	29	Eden Medical Center	Eden Hospital Medical Center	010805	Castro Valley	0421	4/15/1991	9/1/1993	
066	01	Baywood Court Dist Part of Eden Hosp	Baywood Court Conv Hospital	N/A	Castro Valley	0421	4/15/1991	9/1/1993	Date of unconsolidation approximate.
067	19	Corona Regional Medical Center	Corona Community Hospital	331145	Corona	1111	10/27/1992		Effective 10/27/94 parent and satellite
067	01	Corona Regional Medical Center	Circle City Hospital	331152	Corona	1111	10/27/1992	***************************************	switched. Satellite 01 was former parent.
067	02	Corona Regional Medical Center	Corona Comm - So. Hills Pavilion	330223	Corona	1111	10/27/1992	7/15/1993	Became Life Care Ctr of Corona 7/15/93.
068	19	Medical Ctr at the Univ of Ca San Fran.		381154	San Francisco	0423	9/14/1992	11/197	
068	01	Langley Porter Psychiatric Institute		380868	San Francisco	0423	9/14/1992	11/197	
069	19	Doctors Medical Center	Doctors Hospital of Modesto	500852	Modesto	0511	5/28/1993	4/29/1994	Earlier consolidation, see consol, # 028.
069	01	Modesto Psychiatric Center		504001	Modesto	0511	5/28/1993	4/29/1994	Re-consolidated as consol. # 075.
070	19	Fountain Valley Reg Hosp MC - Euclid	Fountain Valley Community Hosp	301175	Fountain Valley	1014	5/25/1993		
070	01	Fountain Valley Reg Hosp MC - Warner	Charter Hosp of Fountain Valley	304039	Fountain Valley	1014	5/25/1993		
071	19	Alameda Co. MC - Highland Campus	Highland General Hospital	010846	Oakland	0417	7/1/1993		
071	01	Alameda Co. MC - Fairmont Campus	Fairmont Hospital	010811	San Leandro	0421	7/1/1993		
072	19	UCSD/San Diego Univ Medical Ctr	University of California Medical Ctr	370782	San Diego	1418	7/20/1993		
072	01	UCSD/La Jolla Thornton Hospital	Oliverency of Camerina Medical Ca	374141	La Jolla	1416	7/20/1993		New facility.
073	19	Downey Community Hospital		190243	Downey	0921	6/30/1993	5/4/2001	in the state of th
073	01	Rio Hondo Hospital		190651	Downey	0921	6/30/1993	5/4/2001	Hospital closed 5/4/2001
074	19	Loma Linda University Medical Center		361246	Loma Linda	1209	1/1/1994	3/4/2001	1103pital 6losed 5/4/2001
074	01	Loma Linda University Medical Center	Loma Linda Community Hospital	361245	Loma Linda	1209	1/1/1994		
075	19	Stanislaus Medical Center	Scenic General Hospital	501015	Modesto	0511	4/30/1994		
075	01	Stanislaus Behavioral Health Center	Modesto Psychiatric Center	504001	Modesto	0511	4/30/1994		Earlier consolidation, see consol. # 069.
076	19		•		l l	0423	6/16/1994		,
076	0	Calif Pacific Med Ctr - Pacific Campus	Pacific Presbyterian	380929	San Francisco	0423	6/16/1994	9/21/1996	Earlier consolidation, see consol. # 014.
076	01	Calif Pacific Med Ctr - Garden Campus	Garden Sullivan (Garden Campus)	382684 380826	San Francisco	0423	6/16/1994	3/2 1/ 1990	Earlier consol., see consol. # 014. Closed 9/21/96 Earlier consolidation, see consol. # 046.
076	02	Calif Pacific Med Ctr - West Campus	Marshal Hale (Sacto Campus)		San Francisco	0423	6/16/1994		
076	02	Calif Pacific Med Ctr - East Campus	Children's Hosp. of S. F. (Calif. Campus) Ralph K. Davies Medical Center	380777 380933	San Francisco San Francisco	0423	7/30/1998		Earlier consolidation, see consol. # 046.
		Calif Pacific Med Ctr - Davies Campus	Raiph R. Davies Medical Center	I	i I	_	9/1/1994		
077	29	Fallbrook Hospital District	Followerk Conversement Linearity	370705	Fallbrook	1414			
077	01	Fallbrook Hospital District SNF	Fallbrook Convalescent Hospital	370704	Fallbrook	1414	9/1/1994		<u> </u>
078	19	Los Angeles Community Hospital	New yells Community 11	190198	Los Angeles	0925	8/1/1994		
078	01	Los Angeles Comm Hosp of Norwalk	Norwalk Community Hospital	190570	Norwalk	0921	8/1/1994		
079	19	Mission Comm Hosp - Panorama		190524	Panorama City	0905	6/22/1994	***************************************	
079	01	Mission Comm Hosp - San Fernando	San Fernando Community Hospital	190676	San Fernando	0903	6/22/1994		
080	19	Kaiser Foundation Hospital - Sunset		190429	Los Angeles	0925	7/27/1994		

Par/Sat # Parent Locations: (Codes): 19 - Acute Consol, Only

Satellite Locations: Sequentially Numbered; 01 - 09

29 - LTC Consol, Only 39 - Acute and LTC Consol

Consol.	Par/	Parent/Satellite	Former	6-Digit		HFPA	Consol.	Unconsol.	Comments
#	Sat #	Name	Name	I.D. #	City	#	Date	Date	Field
080	01	Kaiser Found Hosp Mental Health Ctr	Resthaven Psychiatric Hospital	190646	Los Angeles	0925	7/27/1994		
081	19	North Coast Rehab Center - Sotoyome	North Coast Rehabilitation Center	490907	Santa Rosa	0401	9/20/1994	2/1/2000	see consol #198
081	01	North Coast Rehab Center - Fulton	No. Coast Rehab Ctr Acute Psych	494048	Santa Rosa	0401	9/20/1994	2/1/2000	
082	19	USC University Hospital		194219	Los Angeles	0925	2/24/1994		Error - Changed incorrect consolidation
082	01	USC University Hospital - Norfolk	Estelle Doheny Eye Hospital	191389	Los Angeles	0925	2/24/1994		date of 8/30/95 to 2/24/94.
095	19	Kaweah Delta District Hospital		540734	Visalia	0611	2/1/1996		
095	01	Visalia Community Hospital		540827	Visalia	0611	2/1/1996		
101	19	Kaiser Foundation Hospital - Oakland	Kaiser Foundation Hospital	010856	Oakland	0417	9/7/1995		
101	01	Kaiser Foundation Hospital - Richmond	Kaiser Foundation Hospital	070991	Richmond	0413	9/7/1995		
115	19	Sutter General Hospital		341051	Sacramento	0311	3/1/1996		Earlier consolidation, see consol. # 023.
115	01	Sutter Memorial Hospital		341052	Sacramento	0311	3/1/1996		
142	19	Anaheim General Hospital		301097	Anaheim	1012	6/12/1996		
142	01	Buena Park Medical Center		301109	Buena Park	1011	6/12/1996		
161	19	Kaiser Found Hosp - Walnut Creek	Kaiser Foundation Hospital	070990	Walnut Creek	0411	7/1/1996		
161	01	Kaiser Found Hosp - Martinez	Kaiser Foundation Hospital	071010	Martinez	0411	7/1/1996		
164	19	Kaiser Found Hosp - Sacto (Morse)	Kaiser Foundation Hosp - Sacto	340913	Sacramento	0311	7/24/1996		
164	01	Kaiser Found Hosp - Valley Med Ctr	Kaiser Foundatn Hosp - Roseville	314024	Roseville	0309	7/24/1996		
176	19	Bakersfield Memorial Hosp - 34th St	Bakersfield Memorial Hospital	150722	Bakersfield	0617	11/1/1997		
176	01	Bakersfield Memorial Hosp - White Ln	Memorial Center	154044	Bakersfield	0617	11/1/1997		
179	19	Specialty Hosp of So Calif - La Mirada	Medical Center of La Mirada	190449	La Mirada	0921	10/7/1997		
179	01	Specialty Hosp of So Calif - Orange Co	Doctor's Hospital of Santa Ana	301167	Santa Ana	1012	10/7/1997		
179	02	Specialty Hosp of So Cal-San Gabrial Valley	Covina Valley Community Hospital	190458	West Covina	0915	10/7/1997		
181	19	Fremont Medical Center	Fremont Hospital	510882	Yuba City	0227	6/1/1998		
181	01	Femont Hospital & Behavioral Center	None - New facility on 6/1/98	514020	Yuba City	0227	6/1/1998		
182	19	Enloe Medical Center - Esplanade Campus	N.T. Enloe Memorial Hospital	040962	Chico	0219	6/30/1998		
182	01	Enloe Medical Center - Cohasset Campus	Chico Community Hospital	040828	Chico	0219	6/30/1998		
182	02	Enloe Rehabilitation Center	Chico Community Rehabilitation Hospital	044011	Chico	0219	6/30/1998		
186	19	Los Robles Regional Med Center	Columbia Los Robles Hosp/Med Center	560492	Thousand Oaks	0813	12/16/1997		
186	01	Los Robles Regional Med Center - East	Charter BHS - Thousand Oaks	564018	Thousand Oaks	0813	12/16/1997		
194	19	Fresno Community Hosp & Med Center	Fresno Community Hospital	100717	Fresno	0605	4/15/1999		
194	01	University Medical Center	Valley Medical Center of Fresno	100822	Fresno	0605	4/15/1999		
194	02	Community Behavioral Health Center	Cedar Vista Hospital	104008	Fresno	0605	11/1/2002		
195	19	Saint Louise Regional Hospital	St. Louise Medical Center	434020	Morgan Hill	0433	09/30/99		Closed 11/29/1999
195		St. Louise Regional Hosp (Gilroy Campus)	South Valley Medical Center	434016	Gilroy	0433	09/30/99	11/29/1999	
196	19	Anaheim Memorial Medical Center		301098	Anaheim	1012	09/01/99		
196	01	Anaheim Memorial Medical Center-West	Martin Luther Hospital	301761	Anaheim	1012	09/01/99		
197		Medical Center of the U.C.S.F.		381154	San Francisco	0423	12/24/99		
197	01	U.C.S.F./Mt. Zion		380895	San Francisco	0423	12/24/99		
198	19	Santa Rose Memorial Hospital		491064	Santa Rosa	0401	02/01/00		
198	01	North Coast Care Centers		490907	Santa Rosa	0401	02/01/00	1	See previous consolidation #081
199		City of Angels Medical Ctr-Downtown	City of Angels Medical Center	190661	Los Angeles	0925	03/01/00		
199	01	City of Angels Medical Ctr-Ingleside	Ingleside Hospital	190410	Rosemead	0913	03/01/00		

Par/Sat # Parent Locations: (Codes): 19 - Acute Consol, Only

Satellite Locations: Sequentially Numbered; 01 - 09

Consol.	Par/	Parent/Satellite	Former	6-Digit		HFPA	Consol.	Unconsol.	Comments
#	Sat #	Name	Name	I.D. #	City	#	Date	Date	Field
200	19	San Pedro Peninsula Hospital		190680	San Pedro	0933	01/14/00		11010
200		San Pedro Peninsula Hosp-Harbor City	Bay Harbor Hospital	190057	Harbor City	0933	01/14/00		
201	19	L A Metropolitan Medical Center	Day Harson Hoophar	190854	Los Angeles	0925	07/31/97		Not previously in LFS prior to 4/19/00
201	01	L A Metropolitan Med Ctr Hawthorne Cam	Hawthorne Hospital	190523	Hawthorne	0929	07/31/97		Independent in Er e phor to in to co
206	19	Alvarado Hospital Medical Center		370652	San Diego	1418	06/01/00		
206		Alvarado Hospital Medical Center/SDRI	San Diego Rehabilitation Institute	374063	San Diego	1418	06/01/00		
210	19	Eden Medical Center	Ŭ.	010805	Castro Valley	0421	01/15/00		
210	01	Laurel Grove Hospital		010869	Castro Valley	0421	01/15/00		
211	19	Mills Peninsula Medical Center	Peninsula Hospital Med Center	410852	San Mateo	0427	11/19/96		
211	01	Mills Memorial Hospital	Y	410742	San mateo	0427	11/19/96		Not previously licensed separately
218	19	Mercy Hospital - Bakersfield		150761	Bakersfield	0617	07/15/92		Not previously licensed separately
218	01	Mercy Southwest Hospital		154108	Bakersfield	0617	07/15/92		Not previously licensed separately
224	19	St. Joseph Hospital - Eureka		121080	Eureka	0105	12/22/00		
224	01	General Hospital of Eureka		120981	Eureka	0105	12/22/00		
237	19	San Ramon Regional Medical Center		074017	San Ramon	0411	12/01/01		
237	01	San Ramon Rehabilitation Hospital		074011	San Ramon	0411	12/01/01		
238	19	Doctors Medical Center - San Pablo Campus		070904	San Pablo	0413	06/01/01		
238	01	Doctors Medical Center - Pinole Campus		073449	Pinole	0413	06/01/01		all beds in suspense effective 6/1/01
239	19	Northbay Medical Center		481357	Fairfield	0408	02/01/02		
239	01	Northbay Vacavalley Hospital	Vaca Valley Hopsital	484001	Vacaville	0408	02/01/02		
241	19	Southwest Healthcare System-Murrieta	Rancho Springs Med Center	334068	Murieta	1109	07/01/02		
241	01	Southwest Healthcare System-Wildomar	Inland Valley Medical Center	334001	Wildomar	1109	07/01/02		
243	19	Pacific Hospital of Long Beach		190587	Long Beach	0933	11/21/02		
243	01	Pacific Hospital - South Campus, D/P APH	Long Beach Doctors Hospital	190477	Long Beach	0933	11/21/02		

APPENDIX I

Public 2002 Patient Discharge Data on CD-ROM Comma Delimited Fields

Field Label	Field Name	Recommended/ Required (in- bold) Field Format	Maximum Characters
OSHPD_ID	Hospital Identification Number (2 digit county, 4 digit unique)	Text	6
TYP_CARE	Type of Care (formerly Level of Care)	Text	1
AGE_YRS	Age in Years	Numeric	3
AGECAT20	Age Categories 20	Text	2
AGECAT5	Age Categories 5	Text	1
SEX	Sex	Text	1
ETHNCTY	Ethnicity	Text	1
RACE	Race	Text	1
PATZIP	Patient Zip Code	Text	5
PATCNTY	County of Patient's Residence	Text	2
LOS	Length of Stay	Numeric	5
ADM QTR	Admission Quarter	Text	1
ADM_YR	Admission Year	Text	4
ADM_SRC	Source of Admission	Text	3
ADM_TYPE	Type of Admission	Text	1
DISP	Disposition of Patient	Text	2
DNR	Prehospital Care and Resuscitation (DNR)	Text	1
PAY_CAT	Expected Payer Source - Category	Text	2
PAY_TYPE	Expected Payer Source - Type of Coverage	Text	1
PAY_PLAN	Expected Payer Source - Payment Plan Code	Text	4
CHARGE	Total Charges	Numeric	7
ECODE_P	Principal E-Code - External Cause of Injury	Text	5
ECODE1	Other E-Code #1 - External Cause of Injury	Text	5
ECODE2	Other E-Code #2 - External Cause of Injury	Text	5
ECODE3	Other E-Code #3 - External Cause of Injury	Text	5
ECODE4	Other E-Code #4 - External Cause of Injury	Text	5
MDC	MDC (HCFA Major Diagnostic Category)	Text	2
DRG	DRG (HCFA Diagnosis Related Group)	Text	3
DIAG_P	Principal Diagnosis	Text	5
CPOA_P	Condition Present at Admission for Principal Diagnosis	Text	1
PROC_P	Principal Procedure	Text	4
PROC_PDY	Days From Admission to Principal Procedure	Numeric	4
ODIAG1 TO ODIAG24	Other Diagnosis #1 through #24	Text	5
CPOA1 TO CPOA24	Condition Present at Admission for Other Diagnosis #1 through #24	Text	1
OPROC1 TO OPROC20	Other Procedure #1 through #20	Text	4
PROCDY1 TO PROCDY 20	Days From Admission to Other Procedure #1 through 20	Numeric	4

I - 1 3/27/03

APPENDIX J

Masked Field Frequencies - 2002

Data Element			# Masked	%
Value	Full file	Public file	by code	Masked
Sex * (Masked)	0	700.000		
* (Masked) 1 - Male	1 602 202	709,068	220.460	24.4
	1,603,282	1,265,122	338,160	21.1
2 - Female	2,312,830	1,942,128	370,702	16.0
3 - Other 4 - Unknown	50 201	9 36	41 165	82.0 82.1
0 - Invalid	0	0	0	02.1
Total	3,916,363	3,916,363	709,068	18.1
Total	3,910,303	3,910,303	709,000	10.1
Ethnicity	0	4 400 050		
* (Masked) 1 - Hispanic	0	1,160,350	040 044	00.0
	1,073,879	763,238	310,641	28.9
2 - Non-Hispanic 3 - Unknown	2,773,214	1,972,046	801,168	28.9
0 - Invalid	69,270 0	20,729	48,541	70.1
Total	ŭ	ŭ	1 160 350	- 20.6
Total	3,916,363	3,916,363	1,160,350	29.6
_				
Race	0	4 007 070		
* (Masked)	0	1,007,979	500 007	00.0
1 - White	2,821,725	2,232,828	588,897	20.9
2 - Black	332,289	205,507	126,782	38.2
3- Native Am	15,999	4,646	11,353	71.0
4 - Asian	287,778	171,796	115,982	40.3
5 - Other	415,110	281,654	133,456	32.1
6 - Unknown	43,462	11,953	31,509	72.5
0 - Invalid Total	0 3,916,363	0 3,916,363	0 1,007,979	- 25.7
	-,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 7	-
Patient County				
* (Masked)	0	308		
CE	4,623	4,474	149	3.2
NE NE	3,289	3,208	81	2.5
NW	7,005	6,927	78	1.1
All others	3,901,446	3,901,446	0	0.0
Total	3,916,363	3,916,363	308	0.0
Total	0,010,000	0,010,000		0.0
Admit Quarter				
· ·	0	424.020		
* (Masked)	000.630	134,039	24.067	2.0
1 2	989,630	957,763	31,867	3.2 3.3
3	967,369	935,915	31,454	
	985,443	953,066	32,377	3.3
4 Total	973,921 3,916,363	935,580 3,916,363	38,341 134,039	3.9 3.4
Total	3,810,303	3,910,303	134,039	3.4
Agecat5		_		
* (Masked)	0	263,862		
1	596,515	568,061	28,454	4.8
2	215,068	186,478	28,590	13.3
3	729,872	674,183	55,689	7.6
4	1,172,493	1,084,015	88,478	7.5
5	1,202,415	1,139,764	62,651	5.2
Total	3,916,363	3,916,363	263,862	6.7

Data Element Value	Full file		# Masked	%
	ruii iiie	Public file	by code	Masked
Age in Years at A				
Blank (Masked) 0	0 596,515	1,791,783 490,942	105,573	17.7
1	24,797	10,338	14,459	58.3
2	14,965	5,041	9,924	66.3
3	11,529	3,462	8,067	70.0
4	9,873	2,794	7,079	71.7
5	8,969	2,299	6,670	74.4
6	8,500	2,118	6,382	75.1
7 8	8,248 8,117	2,040 2,099	6,208 6,018	75.3 74.1
9	8,064	2,099	5,965	74.1
10	8,398	2,168	6,230	74.2
11	8,588	2,153	6,435	74.9
12	9,787	2,519	7,268	74.3
13	11,052	2,806	8,246	74.6
14	13,026	3,374	9,652	74.1
15 16	16,204 20,586	4,373 6,429	11,831 14,157	73.0 68.8
17	24,365	8,504	15,861	65.1
18	29,061	12,277	16,784	57.8
19	35,120	16,239	18,881	53.8
20	38,941	19,167	19,774	50.8
21	40,514	19,794	20,720	51.1
22	41,847	20,785	21,062	50.3
23 24	41,302 41,893	20,104 20,542	21,198 21,351	51.3 51.0
25	42,943	20,474	22,469	52.3
26	43,685	21,126	22,559	51.6
27	44,352	21,020	23,332	52.6
28	45,006	21,099	23,907	53.1
29	45,866	21,570	24,296	53.0
30 31	47,512	22,398	25,114	52.9 53.4
32	49,470 49,802	23,077 23,073	26,393 26,729	53.4
33	47,689	21,524	26,165	54.9
34	44,869	19,493	25,376	56.6
35	43,749	18,541	25,208	57.6
36	42,052	17,081	24,971	59.4
37	42,554	17,102	25,452	59.8
38	41,541	16,286	25,255	60.8
39 40	40,510 39,827	15,590 15,117	24,920 24,710	61.5 62.0
41	39,262	14,747	24,515	62.4
42	38,760	14,476	24,284	62.7
43	38,278	14,544	23,734	62.0
44	38,692	14,934	23,758	61.4
45	39,500	15,260	24,240	61.4
46 47	38,812	14,966	23,846	61.4
48	39,547 39,671	15,588 15,663	23,959 24,008	60.6 60.5
49	39,727	15,555	24,172	60.8
50	38,979	15,433	23,546	60.4
51	38,974	15,808	23,166	59.4
52	39,248	15,843	23,405	59.6
53	39,377	16,265	23,112	58.7
54 55	40,538	16,900	23,638	58.3
55 56	41,842 35,379	17,949 14,338	23,893 21,041	57.1 59.5
57	35,914	14,713	21,041	59.0
58	37,577	15,993	21,584	57.4
59	39,636	17,523	22,113	55.8
60	36,663	15,729	20,934	57.1
61	36,026	15,623	20,403	56.6
62	36,405	15,914	20,491	56.3

APPENDIX J

Masked Field Frequencies - 2002

Data Element			# Masked	%	Data Elemen
Value	Full file	Public file	by code	Masked	Value
Agecat20					
* (Masked)	0	519,096			
01	596,515	568,061	28,454	4.8	
02	61,164	49,922	11,242	18.4	
03	41,898	30,757	11,141	26.6	
04	50,851	35,896	14,955	29.4	
05	125,336	92,559	32,777	26.2	
06	204,497	177,102	27,395	13.4	
07	221,852	192,901	28,951	13.0	
08	239,342	207,316	32,026	13.4	
09	210,406	176,300	34,106	16.2	
10	194,819	159,260	35,559	18.3	
11	197,257	161,027	36,230	18.4	
12	197,116	162,301	34,815	17.7	
13	190,348	157,530	32,818	17.2	
14	182,547	152,674	29,873	16.4	
15	204,056	174,894	29,162	14.3	
16	235,675	207,386	28,289	12.0	
17	265,577	238,525	27,052	10.2	
18	240,334	217,047	23,287	9.7	
19	256,773	235,809	20,964	8.2	8
Total	3,916,363	3,916,363	519,096	13.3	To

Data Element			# Masked	%
Value	Full file	Public file	by code	Masked
63	36,658	16,454	20,204	55.1
64	36,795	16,674	20,121	54.7
65	39,866	18,899	20,967	52.6
66	40,347	19,320	21,027	52.1
67	40,962	19,954	21,008	51.3
68	40,886	20,261	20,625	50.4
69	41,995	21,164	20,831	49.6
70	43,369	22,636	20,733	47.8
71	45,959	24,331	21,628	47.1
72	48,015	26,101	21,914	45.6
73	48,434	26,969	21,465	44.3
74	49,898	28,281	21,617	43.3
75	51,051	29,483	21,568	42.2
76	52,495	30,873	21,622	41.2
77	54,558	33,123	21,435	39.3
78	53,733	32,908	20,825	38.8
79	53,740	32,934	20,806	38.7
80	54,045	33,933	20,112	37.2
81	52,151	33,059	19,092	36.6
82	48,624	30,450	18,174	37.4
83	43,626	27,012	16,614	38.1
84	41,888	26,355	15,533	37.1
85+	256,773	210,605	46,168	17.8
Total	3,916,363	3,916,363	1,791,783	48.3

J - 2 8-1-03